

**State Court Administrative Office
Trial Court Services
Problem-Solving Courts**

**Michigan Association of Treatment
Court Professionals**



Veterans Treatment Court Standards, Best Practices, and Promising Practices

September 2018



Introduction

Purpose

This manual is an extension of the adult drug court manual written by staff from the State Court Administrative Office and board members of the Michigan Association of Treatment Court Professionals. It is intended to assist Michigan's veterans treatment courts in complying with the veterans treatment court statute,¹ best practices, and the [*10 Key Components of Veterans Treatment Courts*](#). When applicable, information about the Department of Veterans Affairs (VA) is included.

Veterans treatment courts are based on the drug court model, so much of the research in this manual is from studies of drug courts; relevant information and practices have been applied to the veterans treatment court concept. Research suggests that veterans treatment court outcomes are at least as favorable as those of other treatment courts.² The content in this manual comes from many sources, but it leans most heavily on the National Association of Drug Court Professionals *Adult Drug Court Best Practice Standards*, [Volume I](#) and [Volume II](#). When “drug court” is referenced in this manual, it is because the research was conducted on drug courts and not veterans treatment courts. Until veterans treatment court research suggests different practices are appropriate for veterans treatment courts, the assumption is that drug court research is applicable to this population. This manual is intended for all veterans treatment court team members to ensure that their program is following the statute and implementing best practices.

Definitions

The chapters in this manual include three main types of information.

- **Standard:** Standards are pulled directly from the veterans treatment court statute, the *10 Key Components*, or case law and precedent that are binding on Michigan courts.
- **Best Practice:** Best practices are supported by scientific research and data or nonbinding case law, and are proven methods to follow. Best practices have been shown by empirical research to produce better outcomes than other practices, and their use results in higher-quality programs.
- **Promising Practice:** Promising practices are not yet supported by scientific research or data, but anecdotal evidence and experience suggest they are helpful in adhering to the model. Promising practices are recommendations for courts to follow to operate a higher-quality program.

¹ See Appendix A.

² See *Veterans Courts: Early Outcomes and Key Indicators for Success*, written by Justin Holbrook and Sara Anderson of the Widener University School of Law, available at <http://ssrn.com/abstract=1912655>. This research paper collects data from multiple sources, including a survey. Because the survey had a small number of respondents, the results should be qualified, but all indications are that veterans treatment courts enjoy favorable comparisons to drug court outcomes.

How to Use This Manual

Each chapter is divided into relevant topics. Included within each topic are the standards, best practices, and promising practices, as well as the supporting authority or research. Not all topics have all three subdivisions: some topics have only best practices, and other topics do not have promising practices.

There are two kinds of best practices in this manual: best practices that a program must follow in order to become a certified veterans treatment court (bolded) and best practices that a program should be following.

There are footnotes throughout the manual that refer to additional research. The 15 appendices are referenced in the chapters, including model documents that courts can use to comply with certain standards and required best practices. If you would like to request training or technical assistance, please contact your regional administrator. If you have questions, please contact TrialCourtServices@courts.mi.gov.

Certification

In order for a program to become a certified veterans treatment court under MCL 600.1201, it must comply with all of the standards and [required best practices](#) in this manual. All standards and required best practices are in bold.

Contents

Chapter 1: Roles and Responsibilities of the Veterans Treatment Court Judge	1
1. General.....	1
2. Staffing Meetings and Review Hearings	2
3. Upon Completion or Termination	4
Works Cited	5
Chapter 2: Participant Supervision and Compliance	6
1. Caseload	6
2. Frequency	6
3. Services to Participants	8
4. Incentives and Sanctions	9
5. Phase Promotion and Graduation	11
6. Termination	12
Works Cited	14
Chapter 3: Confidentiality	16
1. Confidentiality	16
Works Cited	21
Chapter 4: Due Process	22
1. General.....	22
2. Waiver of Rights	23
3. 1st Amendment.....	23
5. 14th Amendment.....	25
6. Sanctions and Termination	26
Works Cited	27
Chapter 5: The Veterans Treatment Court Team	28
1. Team Composition	28
2. Staffing Meetings and Review Hearings	30
3. Communication and Decision Making.....	31
Works Cited	33
Chapter 6: Veterans Treatment Court Population and Admission	34
1. Screening.....	34
2. Eligible Offenses.....	36
3. Clinical Substance Use and Mental Health Assessments	37
4. Risk and Need Assessment	38
5. Legal Outcome	39

6. Admission Factors.....	40
7. Findings on the Record or in the Court File.....	41
8. Program Entry	42
9. Transfers.....	42
Works Cited	44
<i>Chapter 7: Drug and Alcohol Testing</i>	46
1. General.....	46
2. Randomization	47
3. Frequency and Breadth of Testing.....	47
4. Scientifically Valid Drug Testing Methods.....	49
5. Witnessed Collection.....	51
6. Chain of Custody and Results.....	52
Works Cited	53
<i>Chapter 8: Treatment</i>	54
1. General and Definition of Veterans Treatment Courts.....	54
2. Treatment Entry	56
3. Treatment Services	56
4. Evidence-Based Models of Treatment	58
5. Treatment Duration	58
6. Medication-Assisted Treatment (MAT).....	59
Works Cited	60
<i>Chapter 9: Education</i>	61
1. General.....	61
Works Cited	63
<i>Chapter 10: Program Evaluation</i>	64
1. Collection and Maintenance of Information	64
2. Evaluation and Program Modification	64
Works Cited	66
<i>Chapter 11: Veteran Peer Mentors</i>	67
1. General and the Role of Mentors	67
Works Cited	70
<i>Appendix A Michigan Veterans Treatment Court Statute</i>	71
<i>Appendix B Model Veterans Treatment Court Discharge Statement</i>	81
<i>Appendix C Model Multi-Party Consent for Release of Information</i>	82
<i>Appendix D Model Notice of Prohibition Against Redisclosure</i>	86

<i>Appendix E Model Confidentiality Policies and Procedures</i>	<i>87</i>
<i>Appendix F Model DCCMIS User Confidentiality Agreement.....</i>	<i>89</i>
<i>Appendix G Model Confidentiality MOU</i>	<i>93</i>
<i>Appendix H Model Visitor Confidentiality and Consent for Release of Information.....</i>	<i>101</i>
<i>Appendix I Model Program MOU</i>	<i>105</i>
<i>Appendix J Model Veterans Treatment Court Agreement to Participate and Waiver</i>	<i>117</i>
<i>Appendix K Model Program Violation and Advice of Rights</i>	<i>120</i>
<i>Appendix L Veterans Treatment Court Admission Conditions.....</i>	<i>122</i>
<i>Appendix M Model MOU for Transfer of Jurisdiction Under MCL 600.1088</i>	<i>124</i>
<i>Appendix N Ten Principles of a Good Testing Program.....</i>	<i>127</i>
<i>Appendix O Veterans Treatment Court Minimum Standard Data</i>	<i>128</i>

Chapter 1: Roles and Responsibilities of the Veterans Treatment Court Judge

This chapter discusses the judge's role on the veterans treatment court team. The judge serves as the leader of the team and plays an important part in guiding participants through the program. Specific topics include the term as a veterans treatment court judge, staffing meetings, and review hearings. Confidentiality is mentioned but discussed in further detail in Chapter 3. The judge is also important in ensuring participants' due process rights are protected; best practices regarding due process are discussed in Chapter 4.

In order for a program to become a certified veterans treatment court, it must comply with all of the standards and required best practices in this chapter. All standards and required best practices are in bold.

1. General

a. Standards

- i. **A veterans court shall comply with the modified version of the 10 key components of drug treatment courts as promulgated by the Buffalo veterans treatment court, which include all of the following essential characteristics:**
 - **Integration of alcohol, drug treatment, and mental health services with justice system case processing (MCL 600.1201(1)(a))**
 - **Ongoing close judicial interaction with each veteran is essential (MCL 600.1201(1)(g))**
 - **Continuing interdisciplinary education promotes effective veterans treatment court planning, implementation, and operations. (MCL 600.1201(1)(i))**
- ii. **An independent and honorable judiciary is indispensable to justice in our society. A judge should participate in establishing, maintaining, and enforcing, and should personally observe, high standards of conduct so that the integrity and independence of the judiciary may be preserved. A judge should always be aware that the judicial system is for the benefit of the litigant and the public, not the judiciary. (Michigan Code of Judicial Conduct, Canon 1)**

b. Best Practices

- i. **Participants ordinarily appear before the same judge throughout their enrollment in the veterans treatment court.**
 - **Drug courts that rotated the judicial assignment or where participants appeared before alternating judges had the poorest outcomes in several research studies. (Finigan, Carey, & Cox, 2007) (National Institute of Justice, 2006)**

- ii. **The judge attends current training events on legal and constitutional issues in veterans treatment courts, judicial ethics, evidence-based substance abuse and mental health treatment, behavior modification, and community supervision.**
 - Because judges have such a substantial impact on outcomes in treatment court, continued training is especially important. (Carey, Mackin, & Finigan, 2012)
- iii. The judge presides over the veterans treatment court for no less than two consecutive years.
 - When judges preside over drug courts for at least two years, those programs have significant cost savings and significantly lower recidivism. (Carey, Pukstas, Waller, Mackin, & Finigan, 2008) (Carey, Mackin, & Finigan, 2012)
 - Even greater reductions in recidivism were found in courts where the judges oversaw the drug court on a voluntary basis and the term was indefinite. (Carey, Mackin, & Finigan, 2012)
- iv. The judge bases interaction with participants on the four principles of procedural fairness: voice, neutrality, respectful treatment, and trustworthy authorities.
 - Drug use, probation violations, and recidivism rates were all reduced in drug courts that applied the four principles of procedural fairness. (MacKenzie, 2016)

2. Staffing Meetings and Review Hearings

a. Standards

- i. **The judge is the final arbiter of factual controversies and makes the final decision concerning the imposition of incentives or sanctions that affect a participant's legal status or liberty.**
 - **In order to continue to participate in and successfully complete a veterans treatment court program, an individual shall make all payments ordered pursuant to MCL 600.1208(1)(a-d) and comply with all court orders, violations of which may be sanctioned at the court's discretion. (MCL 600.1208(1)(e) and (f))**
 - **The veterans treatment court shall be notified if the veterans treatment court participant is accused of a new crime, and the judge shall consider whether to terminate the participant's participation in the veterans treatment program in conformity with the memorandum of understanding under section 1201(2). If the participant is convicted of a felony for an offense that occurred after the defendant is admitted to the veterans treatment court, the judge shall terminate the participant's participation in the veterans treatment court. (MCL 600.1208(2))**

- ii. **In the performance of judicial duties, the following standards apply:**
 - **A judge should be faithful to the law and maintain professional competence in it. A judge should be unswayed by partisan interests, public clamor, or fear of criticism. (Michigan Code of Judicial Conduct, Canon 3(A)(1))**
 - **A judge should be patient, dignified, and courteous to litigants, jurors, witnesses, lawyers, and others with whom the judge deals in an official capacity, and should require similar conduct of lawyers and of staff, court officials, and others subject to the judge's direction and control. (Michigan Code of Judicial Conduct, Canon 3(A)(3))**
 - **Without regard to a person's race, gender, or other protected personal characteristic, a judge should treat every person fairly, with courtesy, and respect. (Michigan Code of Judicial Conduct, Canon 3(A)(10))**

b. Best Practices

- i. **The judge regularly attends staffing meetings during which the veterans treatment court team reviews each participant's progress and discusses potential consequences for performance.**
 - Research has consistently shown that when the judge regularly attends staffing meetings, cost savings increase and recidivism is reduced. (Carey, Pukstas, Waller, Mackin, & Finigan, 2008) (Carey, Mackin, & Finigan, 2012)
- ii. **The judge considers the perspectives of all team members before making final decisions that affect participants' welfare or liberty interests. The judge relies on the expert input of duly trained treatment professionals when imposing treatment-related conditions.**
 - The collaborative nature of treatment courts brings together experts from various disciplines. Their expertise and shared information allow the judge to make better-informed decisions. (National Association of Drug Court Professionals, 2013) (Hora & Stalcup, 2008)
- iii. **Participants appear before the judge for status hearings at least once every two weeks during the first phase of the program. The frequency of status review hearings may be reduced gradually after participants have initiated abstinence from alcohol and illicit drugs and are regularly engaged in treatment. Status review hearings are scheduled at least once every four weeks until participants are in the last phase of the program.**
 - A substantial body of research demonstrates the importance of scheduling status hearings no less frequently than every two weeks during the first phase of a drug court. Participants had significantly better treatment attendance, substance use abstinence, and graduation rates when they were required to appear before the judge every two weeks. (National Association of Drug Court Professionals, 2013) (Festinger, Marlowe, Lee, Kirby, Bovasso, & McLellan, 2002)

- iv. The judge spends sufficient time during status review hearings reviewing each participant's progress in the program. Evidence suggests judges should spend a minimum of three minutes interacting with each participant in court.
 - Recidivism was significantly reduced, by as much as 153 percent, in drug courts where the judge spent at least three minutes interacting with each participant. The same study showed that cost savings were also improved when the judge spent the minimum three minutes with each participant. (Carey, Mackin, & Finigan, 2012)
- v. The judge offers supportive comments to participants, stresses the importance of their commitment to treatment and other program requirements, and expresses optimism about their ability to improve their health and behavior. The judge does not humiliate participants or subject them to foul or abusive language. The judge allows participants a reasonable opportunity to explain their perspectives concerning factual controversies and the imposition of sanctions, incentives, and therapeutic adjustments.
 - Research has consistently shown that the perceived quality of interactions between participants and the drug court judge is among the most influential factors for success in the program. (National Association of Drug Court Professionals, 2013)
 - Significantly greater reductions in crime and substance abuse resulted when the judges were independently rated as being more fair, attentive, caring, and enthusiastic. (Zweig, Lindquist, Downey, Roman, & Rossman, 2012)

3. Upon Completion or Termination

a. Standards

- i. **pon completion or termination of the veterans treatment court program, the court shall find on the record or place a written statement in the court file as to whether the participant completed the program successfully or whether the individual's participation in the program was terminated and, if it was terminated, the reason for the termination.³ (MCL 600.1209(1))**
- ii. **The court shall send a record of the discharge and dismissal [under MCL 600.1206, and as outlined in MCL 600.1209(4)] to the criminal justice information center of the department of state police, and the department of state police shall enter that information into the L.E.I.N. with an indication of participation by the individual in a veterans treatment court. (MCL 600.1209(6))**

³ See Appendix B. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VTC-DischargeStatment.pdf>.

Works Cited

- Carey, S., Mackin, J., & Finigan, M. (2012). What works? The ten key components of drug court: Research-based best practices. *Drug Court Review*, 7(1), 6-42.
- Carey, S., Pukstas, K., Waller, M., Mackin, R., & Finigan, M. (2008). *Drug courts and state mandated drug treatment programs: Outcomes, costs, and consequences*. Portland, OR: NPC Research.
- Festinger, D., Marlowe, D., Lee, P., Kirby, K., Bovasso, G., & McLellan, A. (2002). Status hearings in drug court: When more is less and less is more. *Drug & Alcohol Dependence*, 151-157.
- Finigan, M., Carey, S., & Cox, A. (2007). *The impact of a mature drug court over 10 years of operation: Recidivism and costs*. Portland: NPC Research.
- Hora, P., & Stalcup, T. (2008). Drug treatment courts in the twenty-first century: The evolution of the revolution in problem-solving courts. *Georgia Law Review*, 717-811.
- MacKenzie, B. (2016). The Judge Is the Key Component: The Importance of Procedural Fairness in Drug-Treatment Courts. *Court Review*, 52, 8-34.
- National Association of Drug Court Professionals. (2013). *Adult Drug Court Best Practice Standards. Volume 1*.
- National Association of Drug Court Professionals. (2015). *Adult Drug Court Best Practice Standards. Volume II*.
- National Institute of Justice. (2006). *Drug courts: The second decade*. Washington, D.C.: Office of Justice Programs, US Department of Justice.
- Zweig, J., Lindquist, C., Downey, P., Roman, J., & Rossman, S. (2012). Drug court policies and practices: How program implementation affects offender substance use and criminal behavior outcomes. *Drug Court Review*, 43-79.

Chapter 2: Participant Supervision and Compliance

This chapter discusses participant supervision and compliance with program requirements. Specific topics include the veterans treatment court supervision caseload, frequency of monitoring events, services provided to participants, incentives and sanctions, phase promotion and graduation, and termination from the veterans treatment court. Several topics are addressed in additional detail in other chapters.

In order for a program to become a certified veterans treatment court, it must comply with all of the standards and required best practices in this chapter. All standards and required best practices are in bold.

1. Caseload

a. Best Practices

- i. The number of individuals participating in the program as a cohort or a track should be fewer than 125.
 - Programs that have fewer than 125 individual participants at one time have statistically significant reductions in recidivism. (Carey, Mackin, & Finigan, 2012)
- ii. Supervision caseloads should not exceed 50 active participants per supervision officer (most commonly a probation officer).
 - Probationers on 50:1 caseloads received significantly more probation office sessions, field visits, employer contacts, telephone check-ins, and substance abuse and mental health treatment. As a consequence of receiving more services, they also had significantly better probation outcomes, including fewer positive drugs tests and other technical violations. (Jalbert & Rhodes, 2012)

2. Frequency

a. Standards

- i. A veterans treatment court shall provide an individual admitted to the court with all of the following:
 - **Consistent, continual, and close monitoring and interaction with the court, treatment providers, probation, and the participant. (MCL 600.1207 (1)(a))**
 - **Periodic evaluation assessments of the participant's circumstances and progress in the program. (MCL 600.1207(1)(d))**

b. Best Practices

- i. **Participants appear before the judge for status hearings at least once every two weeks during the first phase of the program. The frequency of status review hearings may be reduced gradually after participants have initiated abstinence from alcohol and illicit drugs and are regularly engaged in treatment. Status review hearings are scheduled at least once every four weeks until participants are in the last phase of the program.**
 - A substantial body of research demonstrates the importance of scheduling status hearings no less frequently than every two weeks during the first phase of a drug court. Participants had significantly better treatment attendance, substance use abstinence, and graduation rates when they were required to appear before the judge every two weeks. (National Association of Drug Court Professionals, 2013) (Festinger, Marlowe, Lee, Kirby, Bovasso, & McLellan, 2002)
- ii. Participants meet individually with a clinical case manager or comparable treatment professional at least weekly during the first phase of veterans treatment court.
 - Studies consistently find that drug courts reduce recidivism and are more cost-effective when participants meet individually with a clinical case manager or comparable treatment professional at least weekly during the first phase of the program. (Carey, Mackin, & Finigan, 2012) (Cissner, et al., 2013)
- iii. The judge spends sufficient time during status review hearings reviewing each participant's progress in the program. Evidence suggests judges should spend a minimum of three minutes interacting with each participant in court.
 - Recidivism was significantly reduced, by as much as 153 percent, in drug courts where the judge spent at least three minutes interacting with each participant. The same study showed that cost savings were also improved when the judge spent the minimum three minutes with each participant. (Carey, Mackin, & Finigan, 2012)

c. Promising Practices

- i. Participants meet with a supervision officer (most commonly a probation officer) at least twice per month in the early phases of the program. Many courts require weekly meetings in early phases.
 - While there is no specific research available on this topic, research on frequency of review hearings and meetings with clinical case managers is relevant. More frequent meetings allow for closer supervision.

3. Services to Participants

a. Standards

- i. A veterans treatment court shall provide an individual admitted to the court with all of the following:**
 - **A mentorship relationship with another veteran who can offer the participant support, guidance, and advice. It is the intent of the legislature that, where practicable, the assigned mentor should be as similar to the individual as possible in terms of age, gender, branch of service, military rank, and period of military service. (MCL 600.1207(b))**
 - **Substance abuse treatment services, relapse prevention services, education, and vocational opportunities as appropriate and practicable. It is the intent of the legislature that, where practicable, these services shall be provided by the VA. (MCL 600.1207(1)(f))**
 - **Mental health treatment services as appropriate and practicable. It is the intent of the legislature that, where practicable, these services shall be provided by the VA. (MCL 600.1207(1)(g))**
- ii. A veterans court shall comply with the modified version of the 10 key components of drug treatment courts as promulgated by the Buffalo veterans treatment court, which include all of the following essential characteristics:**
 - **Integration of alcohol, drug treatment, and mental health services with justice system case processing. (MCL 600.1201(1)(a))**

b. Best Practices

- i. Where indicated, participants receive assistance finding safe, stable, and drug-free housing beginning in the first phase of veterans treatment court and continuing as necessary throughout their enrollment in the program.**
 - **Participants are unlikely to succeed in treatment if they do not have a safe, stable, and drug-free place to live. (Quirouette, Hannah-Moffat, & Maurutto, 2015)**
- ii. Participants regularly attend self-help or peer-support groups in addition to professional counseling. The peer-support groups follow a structured model or curriculum such as 12-step or Smart Recovery and offer nonfaith-based options.**
 - **Participation in self-help or peer-support groups is consistently associated with better long-term outcomes, including greater abstinence and lower mortality rates, when used in conjunction with substance abuse treatment. (Kelly, Stout, Zywiak, & Schneider, 2006) (Moos & Timko, 2008)**

- iii. Participants with deficient employment or academic histories receive vocational or educational services beginning in a late phase of veterans treatment court.
 - At least two studies of drug courts have reported improved program retention, graduation rates, and treatment retention when unemployed or underemployed participants received a manualized, cognitive-behavioral vocational intervention. (Deschenes, Ireland, & Kleinpeter, 2009) (Leukefeld, Webster, Staton-Tindall, & Duvall, 2007)
- iv. Ignition interlock devices and restricted driver licenses are made available to eligible participants. Veterans treatment courts should use the National Center for DWI Courts ignition interlock device guidelines when incorporating the use of these devices into their programs.⁴
 - An evaluation of Michigan's Ignition Interlock Pilot Program showed that, compared to noninterlock offenders in DWI/Sobriety Court and to standard probationers, interlock program participants have the lowest recidivism rates after one, two, three, and four years of follow-up. This is true for both drunk driving-related reoffending and for general criminal reoffending. (Kierkus & Johnson, 2016)

4. Incentives and Sanctions

a. Standards

- i. **A veterans treatment court shall provide an individual admitted to the court with all of the following:**
 - **A regimen or strategy of appropriate and graduated but immediate rewards for compliance and sanctions for noncompliance, including, but not limited to, the possibility of incarceration or confinement. (MCL 600.1207(1)(e))**
- ii. **A veterans court shall comply with the modified version of the 10 key components of drug treatment courts as promulgated by the Buffalo veterans treatment court, which include all of the following essential characteristics:**
 - **A coordinated strategy that governs veterans treatment court responses to participants' compliance. (MCL 600.1201(1)(f))**

⁴ The Michigan Secretary of State has interpreted veterans treatment courts to be within the Drug/DWI court model for purposes of ignition interlock requirements. Thus, veterans treatment courts can offer ignition interlock restricted licenses to their participants.

b. Best Practices

- i. The veterans treatment court places as much emphasis on incentivizing productive behaviors as it does on reducing crime, substance abuse, and other infractions.**
 - Drug courts are able to reduce substance use and better prevent criminal behavior when they focus as much on incentivizing productive behaviors as they do on reducing noncompliant or undesirable behaviors. (Zweig, Lindquist, Downey, Roman, & Rossman, 2012)
- ii. The veterans treatment court has a range of sanctions of varying magnitudes that may be administered in response to program infractions.**
 - Programs are able to reduce substance use and recidivism when the sanctions for failing to meet difficult goals increase progressively in magnitude over successive infractions. This gives treatment a chance to take effect, and prepares participants to meet steadily increasing responsibilities in the program. (National Association of Drug Court Professionals, 2013)
 - Sanctions that are weak in magnitude can cause habituation in which the individual becomes accustomed, and thus less responsive, to punishment. Imposing high-magnitude sanctions when a participant fails to meet an easy goal helps to avoid habituation. (National Association of Drug Court Professionals, 2013)
- iii. Sanctions are imposed as quickly as possible after noncompliant behavior. Veterans treatment courts do not wait for the next review hearing to impose a sanction if the behavior can be addressed more immediately.**
 - The value of having sanctions imposed immediately after noncompliant behavior is a central tenet of behavior modification. Study results show that recidivism and cost-savings do not improve when drug courts wait until the next scheduled court appearance for noncompliant participants instead of bringing them in earlier. (Carey, Mackin, & Finigan, 2012)
- iv. Jail sanctions are definite in duration and typically last no longer than five days. Participants are given access to counsel and a fair hearing if a jail sanction might be imposed as a liberty interest is at stake.**
 - Drug courts significantly lower recidivism and improve cost savings when they use jail sanctions sparingly. (Carey, Pukstas, Waller, Mackin, & Finigan, 2008)
 - Research indicates that jail sanctions produce diminishing returns after approximately three to five days. (Carey, Mackin, & Finigan, 2012)
- v. Participants do not receive punitive sanctions if they are otherwise compliant with their treatment and supervision requirements, but are not responding to the treatment interventions. The appropriate course of action may be to reassess the individual and adjust the treatment plan accordingly.**
 - If a drug court imposes substantial sanctions for substance use early in treatment, the team is likely to run out of sanctions and reach a ceiling effect before treatment has taken effect. Therefore, drug courts should

ordinarily adjust participants' treatment requirements in response to positive drug tests early in the program. (Chandler, Fletcher, & Volkow, 2009)

- vi. Participants are not incarcerated to achieve clinical or social service objectives such as obtaining access to detoxification services or sober living quarters.
 - Relying on in-custody substance abuse treatment can reduce the cost-effectiveness of a drug court by as much as 45 percent. (Carey, Mackin, & Finigan, 2012)
- vii. Programs have a written schedule of sanctions for infractions that is shared with participants, but the team retains discretion to overrule the sanctions if there is good reason to do so.
 - Multistate research showed the most effective programs with regard to recidivism included greater predictability of sanctions. (Rossman & Zweig, 2012)

c. Promising Practices

- i. Immediate and tangible rewards help a veterans treatment court demonstrate the benefits of abstinence and treatment. Courts should seek to include tangible or token rewards, such as coins, gifts, certificates, or entry into a drawing in an incentives program.
 - Frequently, the benefits of abstinence, such as better health and lifestyle, are abstract and distant to the abuser. The point of motivational incentives is to bring the benefits of abstinence forward in less time. Both voucher- and prize-based reinforcement systems have been repeatedly shown to be effective interventions among substance abusers. (Stitzer, 2008) These tangible rewards can be used in veterans treatment court to more quickly improve behaviors.

5. Phase Promotion and Graduation

a. Standards

- i. **In order to continue to participate in and successfully complete a veterans treatment court program, an individual shall do all of the following:**
 - **Pay all court-ordered fines and costs, including minimum state costs. (MCL 600.1208(1)(a))**
 - **Pay the veterans treatment court fee allowed under section 1206(4). (MCL 600.1208(1)(b))**
 - **Pay all court-ordered restitution. (MCL 600.1208(1)(c))**
 - **Pay all crime victims' rights assessments under section 5 of 1989 PA 196, MCL 780.905. (MCL 600.1208(1)(d))**
 - **Comply with all court orders. Violations of a court order may be sanctioned within the court's discretion. (MCL 600.1208(1)(e))**
 - **Meet with a member of a veteran service organization or a county veteran counselor to discuss available veteran benefit programs for which the individual may qualify. (MCL 600.1208(1)(f))**

- ii. **The court shall not sentence a defendant to a term of incarceration, nor revoke probation, for failure to comply with an order to pay money unless the court finds, on the record, that the defendant is able to comply with the order without manifest hardship and that the defendant has not made a good-faith effort to comply with the order. (MCR 6.425(3)(a))**
- iii. **If the court finds that the defendant is unable to comply with an order to pay money without manifest hardship, the court may impose a payment alternative, such as a payment plan, modification of any existing payment plan, or waiver of part or all of the amount of money owed to the extent permitted by law. (MCR 6.425(3)(b))**

b. Best Practices

- i. **Phase promotion is predicated on the achievement of realistic and defined behavioral objectives, such as completing a treatment regimen or remaining drug-abstinent for a specific period of time.**
 - Drug courts have significantly better outcomes when they have a clearly defined phase structure and concrete behavioral requirements for advancement. (Carey, Mackin, & Finigan, 2012)
 - Phase advancement should not be based simply on the amount of time that participants have been enrolled in the program. (National Association of Drug Court Professionals, 2013)
- ii. In order to graduate, participants who are able to join the labor force must have a job or be in school in instances where health insurance and other social benefits such as VA benefits are not at risk.
 - Both having a job and being in school are connected to cost-savings and reduced recidivism after the participant leaves the program. (Carey, Mackin, & Finigan, 2012)
- iii. A period of greater than 90 continuous days of negative drug test results is required before a participant is eligible to graduate.
 - Drug courts where participants were expected to have greater than 90 days clean (demonstrated by negative drug tests) before graduation had 164 percent greater reductions in recidivism compared with programs that expected less clean time. (Carey, Mackin, & Finigan, 2012)

6. Termination

a. Standards

- i. **The veterans treatment court shall be notified if the veterans treatment court participant is accused of a new crime, and the judge shall consider whether to terminate the participant's participation in the veterans treatment program in conformity with the memorandum of understanding under section 1201(2). If the participant is convicted of a felony for an offense that occurred after the defendant is admitted to veterans treatment court, the judge shall terminate the participant's participation in the veterans treatment court. (MCL 600.1208(2))**

b. Best Practices

- i. Participants are terminated from the veterans treatment court if they can no longer be managed safely in the community or if they fail repeatedly to comply with treatment or supervision requirements.**
 - Drug courts have significantly poorer outcomes and are considerably less cost-effective when they terminate participants based only on drug or alcohol use. Drug courts that had a policy of terminating participants for positive drug tests or new arrests for drug possession offenses had 50 percent higher criminal recidivism and 48 percent lower cost savings than drug courts that responded to new use by increasing treatment or applying sanctions of lower severity. (Carey, Mackin, & Finigan, 2012)
- ii. Participants are not terminated from the veterans treatment court for continued substance use if they are otherwise compliant with their treatment and supervision conditions, unless they are nonamenable to the treatments that are reasonably available in their community. If a participant is terminated from the program because adequate treatment is not available, the participant does not receive an augmented sentence or disposition for failing to complete the program.**
 - Drug courts that terminated participants merely for drug or alcohol use have significantly poorer recidivism rates and are less cost-effective. (Carey, Mackin, & Finigan, 2012)

Works Cited

- Carey, S., Mackin, J., & Finigan, M. (2012). What works? The ten key components of drug court: Research-based best practices. *Drug Court Review*, 7(1), 6-42.
- Carey, S., Pukstas, K., Waller, M., Mackin, R., & Finigan, M. (2008). *Drug courts and state mandated drug treatment programs: Outcomes, costs, and consequences*. Portland, OR: NPC Research.
- Chandler, R., Fletcher, B., & Volkow, N. (2009). Treating drug abuse and addiction in the criminal justice system: Improving public health and safety. *Journal of the American Medical Association*, 183-190.
- Cissner, A., Rempel, M., Franklin, A., Roman, J., Bieler, S., Cohen, R., et al. (2013). *A statewide evaluation of New York's adult drug courts: Identifying which policies work best*. New York: Center for Court Innovation.
- Deschenes, E., Ireland, C., & Kleinpeter, C. (2009). Enhancing drug court success. *Journal of Offender Rehabilitation*, 19-36.
- Festinger, D., Marlowe, D., Lee, P., Kirby, K., Bovasso, G., & McLellan, A. (2002). Status hearings in drug court: When more is less and less is more. *Drug & Alcohol Dependence*, 151-157.
- Jalbert, S., & Rhodes, W. (2012). Reduced caseloads improve probation outcomes. *Journal of Crime and Justice*, 221-238.
- Kelly, J., Stout, R., Zywiak, W., & Schneider, R. (2006). A three-year study of addiction mutual-help group participation following intensive outpatient treatment. *Alcoholism: Clinical & Experimental Research*, 1381-1392.
- Kierkus, C., & Johnson, B. (2016). *Michigan DWI/Sobriety Court Ignition Interlock Evaluation*. Lansing.
- Leukefeld, C., Webster, J., Staton-Tindall, M., & Duvall, J. (2007). Employment and work among drug court clients: 12-month outcomes. *Substance Use & Misuse*, 1109-1126.
- Moos, R., & Timko, C. (2008). Outcome research on 12-step and other self-help programs. In M. G. Kleber, *Textbook of Substance Abuse Treatment* (pp. 511-521). Arlington, VA: American Psychiatric Publishing.
- National Association of Drug Court Professionals. (2013). *Adult Drug Court Best Practice Standards. Volume 1*.
- National Association of Drug Court Professionals. (2015). *Adult Drug Court Best Practice Standards. Volume II*.
- Quirouette, M., Hannah-Moffat, K., & Maurutto, P. (2015). 'A precarious place': Housing and clients of specialized courts. *British Journal of Criminology*.
- Rodriguez, P. (2011). Case management for substance abusing offenders. *Handbook of evidence-based substance abuse treatment in criminal justice settings*, 173-181.
- Rossman, S. B., & Zweig, J. M. (2012, May). The Multistate Adult Drug Court Evaluation. *Need to Know*, 3.
- Shaffer, D. (2010). Looking inside the black box of drug courts: A meta-analytic review. *Justice Quarterly*, 28(3), 493-531.

- Stitzer, M. (2008). Motivational incentives in drug courts. *Quality Improvement for Drug Court: Evidence-Based Practices*, 99.
- Zweig, J., Lindquist, C., Downey, P., Roman, J., & Rossman, S. (2012). Drug court policies and practices: How program implementation affects offender substance use and criminal behavior outcomes. *Drug Court Review*, 43-79.

Chapter 3: Confidentiality

This chapter addresses confidentiality issues in veterans treatment court and shares information with Chapter 4 (Due Process); readers should review chapters 3 and 4 together. Specific information in this chapter includes the Health Insurance Portability and Accountability Act (HIPAA), 42 CFR Part 2, redisclosure, records management, and staff training. Courts should also review the [*Patient Rights & Responsibilities*](#) information and [*VA Privacy Practices*](#) available at <https://www.va.gov/health/>. Specific VA regulations and directives are available from the VA's Office of Regulation Policy and Management at <https://www.va.gov/orpm/>.

In order for a program to become a certified veterans treatment court, it must comply with all of the standards and required best practices in this chapter. All standards and required best practices are in bold.

1. Confidentiality

a. Standards

- i. **Title 42 of the United States Code, Section 290dd-2, is the federal law that protects the confidentiality of the identity, diagnosis, prognosis, or treatment of any patient records that are maintained in connection with the performance of any federally assisted program or activity relating to substance abuse education, prevention, training, treatment, rehabilitation, or research. 42 CFR, Part 2, contains the regulations implementing the alcohol and substance abuse confidentiality law. Full text of the law is available [here](#).**
 - A veterans treatment court's performance of, or request for, an assessment of chemical dependency of a participant, or a referral to treatment, places the veterans treatment court within the parameters of 42 CFR, Part 2, section 2.11.
- ii. **The Health Insurance Portability and Accountability Act (HIPAA) is a federal law that protects confidentiality and the security of protected health information. While it does not directly apply to treatment courts, HIPAA does apply to the treatment agencies partnering with treatment courts, so veterans treatment courts must also comply with HIPAA. Full text of the HIPAA privacy law is available [here](#).**
- iii. **Except as otherwise permitted in the [veterans treatment court statute](#), any statement or other information obtained as a result of an individual's participation in a preadmission screening and evaluation assessment under subsection (3) is confidential, is exempt from disclosure from the freedom of information act, 1976 PA 442, MCL 15.231 to 15.246, and shall not be used in a criminal prosecution, except for a statement or information that reveals criminal acts other than personal drug use. (MCL 600.1203(4))**

- iv. Any statement or other information obtained as a result of participating in assessment, treatment, or testing while in a veterans treatment court is confidential and is exempt from disclosure under the freedom of information act, 1976 PA 442, MCL 15.231 to 15.246, and shall not be used in a criminal prosecution, except for a statement or information that reveals criminal acts other than, or inconsistent with, personal drug use. (MCL 600.1207(2))
- v. Confidential treatment court information and records may not be used to initiate or to substantiate any criminal charges against a participant or to conduct any investigation of a participant. (42 CFR, Section 2.35(d))
- vi. State law may neither authorize nor compel any disclosure prohibited by the federal regulations, but where state law prohibits disclosure that would be permissible under the federal regulations, the stricter standard applies. (42 CFR, Section 2.20)
- vii. Treatment courts may receive or release information or records of participants only with the specific knowing, voluntary, and written consent of the participant, or under certain very limited exceptions. (42 CFR, Sections 2.22 and 2.31(a)) (Veterans Health Administration Notice of Privacy Practices)
 - Waiver is the “voluntary relinquishment of a known right.” (Kelly v Allegan Circuit Judge, 1969)
 - Consent must include the following under 42 CFR, Sections 2.14-2.35:⁵
 - The specific name or general designation of the program or person permitted to make the disclosure.
 - The name of the participant permitting disclosure.
 - The name or title of the individual(s), or the name of the organization, to which (re)disclosure is to be made.
 - If a general designation is used (agency name or staff title), without a specific named person, then a statement must be included on the consent form that the patient (or other individual authorized to sign in lieu of the patient), confirms their understanding that, upon their request and consistent with this part, they must be provided a list of entities to which their information has been disclosed under the general designation. (See § 2.13(d))
 - The purpose of the (re)disclosure.
 - How much and what kind of information is to be disclosed, which must be limited to the information which is necessary to carry out the stated purpose.
 - The participant’s signature and the signature of a person authorized to give consent for a minor.
 - The date on which consent is signed.

⁵ See Appendix C. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/ReleaseInfoMultiParty.pdf>.

- Date, event, or condition upon which the consent will expire. The date, event, or condition must insure that the consent will last no longer than reasonably necessary to serve the purpose for which it is given.
 - Federal regulations require that the scope of the disclosures be limited to the information necessary to carry out the purpose of the disclosures. (42 CFR, 2.13(a))
- viii. The participant must be advised, orally and in writing, that federal law protects the confidentiality of treatment records. The notice must cite Section 290dd-2 and the implementing regulations (Sections 2.1 through 2.67 of Title 42 of the code of Federal Regulations), and must state the following:⁶
 - Treatment information is ordinarily kept confidential;
 - It is a crime to violate this confidentiality requirement, which the participant may report to appropriate authorities, with the authority's name and contact information provided;
 - Notwithstanding this confidentiality requirement, covered information may be released under specified circumstances (which should be listed for the participant); and
 - Federal law does not protect information relating to crimes committed on the premises of the program, crimes against program personnel, or the abuse or neglect of a child.
- ix. Any documented treatment information distributed on the basis of the treatment participant's consent should be accompanied by a Notice of Prohibition Against Redisclosure.⁷ (42 CFR, Section 2.32)
- x. Treatment courts may not disclose protected health information in response to a subpoena or a search warrant or any other form of request, even if signed by a judge, unless that client signs a consent form authorizing such disclosure, or a court of competent jurisdiction enters an authorizing order under the standards set forth in the federal regulations. (42 CFR, Section 2.61)
- xi. Confidential records are kept in a secure room and locked container. Access to confidential records must be limited to authorized individuals. (42 CFR, Section 2.16)

⁶ See Appendix C. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/ReleaseInfoMultiParty.pdf>.

⁷ See Appendix D. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/NoticeProhibitionAgainstRedisclosure.pdf>.

b. Best Practices

- i. Veterans treatment court planning teams are familiar with relevant federal and state laws and regulations in order to develop appropriate policies and procedures.**
 - Because court programs are integrally involved with supervising the participation of drug offenders in substance abuse treatment, the programs must take into account federal requirements as well as applicable state laws. (Holland, 1999)
- ii. Confidential records are protected after consent expires or is revoked.**
 - All file storage systems include procedures for limiting access to records after the participant's consent expires or is revoked. Thus, paper records that can be accessed by all treatment court personnel during the duration of the participant's consent are transferred to a more restricted storage facility as soon as the consent is terminated. Records on computers are sealed by changing the password or other access. (Tauber, Weinstein, & Taube, 1999)
- iii. Treatment courts adopt written procedures and/or policies, which regulate and control access to and use of written and electronic confidential records. Written procedures include requests for access to confidential information by the public, attorneys, or any interested party outside the treatment court team.⁸ (Meyer, 2011)**
- iv. Treatment courts establish a memorandum of understanding (MOU) on confidentiality and have all team members and replacement team members sign and agree to follow confidentiality procedures.⁹ (Tauber, Weinstein, & Taube, 1999)**
- v. Electronic data that is subject to confidentiality standards is protected by security walls and is password protected. Access is limited, and disclosure/redisclosure is subject to approval by the treatment court judge and team.¹⁰ (Tauber, Weinstein, & Taube, 1999)**
- vi. Precourt staffing meetings may be closed to participants and the public. (State of Washington v. Sykes, 2014) If open, compliance with consent requirements must be obtained.¹¹**
- vii. Treatment courts receive training on federal confidentiality requirements and how they affect treatment court practitioners and contractors. (Meyer, 2011)
- viii. Treatment courts designate a team member as their confidentiality compliance officer. The confidentiality compliance officer should be aware of, and consulted about, all third-party inquiries pertaining to mandated disclosures and permitted disclosures under the federal regulations. (Meyer, 2011)

⁸ See Appendices E and F. These model documents are also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/ConfidentialityPP.pdf> and <https://dccmis.micourt.org/resources/MI/DCCMIS%20User%20Confidentiality%20Agreement.pdf>.

⁹ See Appendix G. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/ConfidentialityMOU.pdf>.

¹⁰ See Appendices E and F. These model documents are also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/ConfidentialityPP.pdf> and <https://dccmis.micourt.org/resources/MI/DCCMIS%20User%20Confidentiality%20Agreement.pdf>.

¹¹ See Appendix H. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VisitorConfidentialityForm.pdf>.

c. Promising Practices

- i. Each team considers instituting video permission for consent.
- ii. Treatment courts receive training on federal confidentiality requirements and how they affect treatment court practitioners and contractors.
- iii. Review hearings are indicated on dockets as judicial review hearings and not as treatment court hearings. This should apply to all printed versions of the docket.
- iv. Treatment courts do not require a written consent and notice form for treatment court visitors and observers.
- v. Nontreatment court staff are advised as to treatment court confidentiality requirements.

Works Cited

Holland, S. (1999). *Practical guide for applying federal confidentiality laws to drug court operations*. Washington, D.C.: U.S. Department of Justice, Office of Justice Programs.

Kelly v Allegan Circuit Judge, 382 Mich 425 (Michigan Supreme Court 1969).

Meyer, W. G. (2011). Confidentiality. In N. D. Institute, *The Drug Court Judicial Benchbook* (pp. 181-194). Alexandria: National Drug Court Institute.

State of Washington v. Sykes, 339 P. 3d 972 (Washington Supreme Court December 18, 2014).

Tauber, J., Weinstein, S., & Taube, D. (1999). *Federal confidentiality laws and how they affect drug court practitioners*. Alexandria: National Drug Court Institute.

Chapter 4: Due Process

This chapter addresses procedural due process in veterans treatment court. Some information in this chapter can also be found in Chapter 3 (Confidentiality); chapters 3 and 4 should be reviewed together. Specific information in this chapter includes the participant waiver of rights, the 1st Amendment, 4th Amendment, and 14th Amendment, as well as sanctions and termination. Please also see the [Michigan Court Rules](#) and [Code of Judicial Conduct](#).

In order for a program to become a certified veterans treatment court, it must comply with all of the standards and required best practices in this chapter. All standards and required best practices are in bold.

1. General

a. Standards

- i. **A veterans court shall comply with the modified version of the 10 key components of drug treatment courts as promulgated by the Buffalo veterans treatment court, which include all of the following essential characteristics:**
 - **Use of a nonadversarial approach; prosecution and defense counsel promote public safety while protecting any participant's due process rights. (MCL 600.1201(1)(b))**
- ii. **The veterans treatment court may require an individual admitted into the court to pay a veterans treatment court fee that is reasonably related to the cost to the court for administering the veterans treatment court program as provided in the memorandum of understanding under section 1201(2).¹² (MCL 600.1206(4))**
 - Courts can use the [SCAO Problem-Solving Court Fee Calculator](#) to help determine what a reasonable fee would be. This calculator should be used only as a guide to help determine a program fee; it is not intended to determine an exact or required amount. Courts can determine the amount of the fee as it is reasonably related to the cost for administering the veterans treatment court program.

¹² See Appendix I. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VTC-ProgramMOU.pdf>.

2. Waiver of Rights

a. Standards

- i. Before an individual is admitted into a veterans treatment court, the court shall find on the record or place a statement in the court file establishing all of the following . . . the individual understands the consequences of entering the veterans treatment court and agrees to comply with all court orders and requirements of the court's program and treatment providers. (MCL 600.1204)
- ii. If the individual being considered for admission to a veterans treatment court is charged in a criminal case, his or her admission is subject to all of the following conditions:¹³
 - The individual waives in writing the right to a speedy trial, the right to representation by an attorney at veterans treatment court review hearings, and, with the agreement of the prosecutor, the right to a preliminary examination. (MCL 600.1205(1)(c))
 - The individual signs a written agreement to participate in the veterans treatment court. (MCL 600.1205(1)(d))
- iii. The surrendering of any rights by the participant must be done knowingly, voluntarily, and intelligently. (Kelly v Allegan Circuit Judge, 1969)

3. 1st Amendment

a. Standards

- i. The mandating of an individual to attend Alcoholics Anonymous/Narcotics Anonymous (AA/NA) is a violation of the 1st Amendment Establishment Clause prohibitions. The 1st Amendment applies to the states via the 14th Amendment of the U.S. Constitution. (Hanas v Inner City Christian Outreach, 2008)
- ii. Veterans treatment court review hearings must be held open to the public.
 - Although the 6th Amendment right "is the right of the accused," a member of the public can invoke the right to a public trial under the 1st Amendment. (United States Constitution, 1st Amendment and 6th Amendment)
 - The sittings of every court within this state shall be public except that a court may, for good cause shown, exclude from the courtroom other witnesses in the case when they are not testifying and may, in actions involving scandal or immorality, exclude all minors from the courtroom unless the minor is a party or witness. This section shall not apply to cases involving national security. (MCL 600.1420)

¹³ See Appendix J. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VTC-AgreementToParticipate.pdf>.

- The party seeking to close the hearing must advance an overriding interest that is likely to be prejudiced, the closure must be no broader than necessary to protect that interest, the trial court must consider reasonable alternatives to closing the proceeding, and it must make findings adequate to support the closure. (People v Vaughn, 2012)
- ii. Veterans treatment court conditions of participation, such as area and association restrictions, must be reasonable and must be narrowly drawn.
 - Analogizing to probation conditions in MCL 771.3(3)), “. . . a sentencing court must be guided by factors that are lawfully and logically related to the defendant’s rehabilitation.” (People v Johnson (Larry), 1995)

b. Best Practices

- i. If it is appropriate and beneficial to order 12-step, self-help programs, offenders who object to the deity-based 12-step programs cannot be ordered to attend them. In those instances, secular alternatives must be made available. (Meyer, 2011)

4. 4th Amendment

a. Best Practices

- i. The veterans treatment court conducts home visits on participants, without reasonable suspicion, as part of a standard monitoring program.
 - Home visits are a critical function of community supervision. (Harberts, 2011)
 - Home visits as a condition of probation in the absence of reasonable suspicion are justified. (United States vs Reyes, 2002)
 - “[A] home visit is not a search, even though a visit may result in seizure of contraband in plain view.” (United States v Newton, 2002)¹⁴
- ii. A waiver against unreasonable searches and seizures may be made as a condition of probation.
 - Analogizing to probation law, “a waiver of one’s constitutional protections against unreasonable searches and seizures may properly be made a condition of a probation order where the waiver is reasonably tailored to a defendant’s rehabilitation.” (People v Hellenthal, 1990) (MCL 791.236(19))
 - A warrantless search of a probationer’s home by a probation officer who had reasonable suspicion was upheld based on a ‘special needs’ balancing test. (Griffin v Wisconsin, 1987)

¹⁴ See also United States v Tessier, U.S. Court of Appeals, Sixth Circuit (02/18/16), citing with favor Reyes, supra; United States v LeBlanc, 490 F3d 361, 370 (5th Cir. 2007) cases upholding less invasive “home visits” where there was no reasonable suspicion.

5. 14th Amendment

a. Standards

- i. There are objective standards that require recusal when “the probability of actual bias on the part of the judge or decision maker is too high to be constitutionally tolerable.” (Withrow v Larkin, 1975)
- ii. Disqualification of a judge is warranted for reasons that include, but are not limited to, the following:
 - The judge is biased or prejudiced for or against a party or attorney. (MCR 2.003(C)(1)(a))
 - The judge, based on objective and reasonable perceptions, has either (i) a serious risk of actual bias impacting the due process rights of a party as enunciated in *Caperton v Massey*, [556 US 868]; 129 S Ct 2252; 173 L Ed 2d 1208 (2009), or (ii) has failed to adhere to the appearance of impropriety standard set forth in Canon 2 of the Michigan Code of Judicial Conduct. (MCR 2.003(C)(1)(b))
 - The judge has personal knowledge of disputed evidentiary facts concerning the proceeding. (MCR 2.003(C)(1)(c))
- iii. A veterans treatment court shall determine whether an individual may be admitted to the veterans treatment court. No individual has a right to be admitted into a veterans treatment court. (MCL 600.1203(1))
- iv. Participation in a drug court (the model for veterans treatment court) is not a fundamental right, and drug offenders are not part of any suspect or semi-suspect class. (*Lamont v State*, 2006)¹⁵

¹⁵ The analysis is under a rational basis equal protection test. See *State v Harner*, 103 P3d 738 (Wash 2004).

6. Sanctions and Termination

a. Best Practices

- i. **Veterans treatment court termination hearings and sanction hearings involving a liberty interest and a contest on the facts require procedural protections under due process and under MCR 6.445, including, but not limited to, the following:¹⁶**
 - **The court must ensure that the participant receives written notice of the alleged violation,**
 - **The court must advise the participant that the participant has a right to contest the charge at a hearing, and**
 - **The court must advise the participant that the participant is entitled to a lawyer's assistance at the hearing and at all subsequent court proceedings, and that the court will appoint a lawyer at public expense if the participant wants one and is financially unable to retain one.**
 - This best practice is based on analogy to due process requirements in termination from probation; supported by several state supreme courts that have ruled on drug court terminations; and it complies with the probation violation rulings in *Gagnon v Scarpelli*, 411 U.S. 778, 92 S.Ct. 1756, 36 L.Ed.2d 656 (1973), and *People v Belanger*, 227 Mich App 637 (1998). See MCR 6.445 for additional information regarding procedural protections under the court rule.

¹⁶ See Appendix K. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/ModelProgVioAdviceRights.pdf>.

Works Cited

- Griffin v Wisconsin, 483 U.S. 868 (United States Supreme Court 1987).
- Hanas v Inner City Christian Outreach, 542 F. Supp 2d 683 (E.D. Michigan 2008).
- Harberts, H. (2011). Community Supervision. In N. D. Institute, *The Drug Court Judicial Benchbook* (pp. 97-111). Alexandria: National Drug Court Institute.
- Kelly v Allegan Circuit Judge, 382 Mich 425 (Michigan Supreme Court 1969).
- Lamont v State, 852 NE2d 1002 (Indiana Court of Appeals 2006).
- Meyer, W. (2011). Constitutional and legal issues in drug court. In N. D. Institute, *The drug court judicial benchbook* (pp. 159-180). Alexandria: National Drug Court Institute.
- People v Hellenthal, 186 Mich App 484 (Michigan Court of Appeals 1990).
- People v Johnson (Larry), 210 Mich App 630, 634 (Michigan Court of Appeals 1995).
- People v Vaughn, 491 Mich 642 (Michigan Supreme Court 2012).
- United States v Newton, 181 F.Supp.2d 157, 161 (Eastern District of New York 2002).
- United States vs Reyes, 283 F.3d 446, 462 (2nd Circuit Court of Appeals 2002).
- Withrow v Larkin, 421 U.S. 35, 47, 95 S.Ct. 1456, 43 L.Ed.2d 712 (United States Supreme Court 1975).

Chapter 5: The Veterans Treatment Court Team

This chapter discusses the various members on a veterans treatment court team and the importance of collaboration among those members. Specific topics include team composition, roles of team members, participation in staffing meetings and review hearings, and communication and decision-making. The role of the judge is discussed in additional detail in Chapter 1 of this manual. Confidentiality is mentioned briefly here, but discussed in detail in Chapter 3. Various members of the team work to ensure participants' due process rights are protected; best practices regarding due process are discussed in Chapter 4. Teams should also engage in training as a team; training and education are discussed in Chapter 9.

In order for a program to become a certified veterans treatment court, it must comply with all of the standards and required best practices in this chapter. All standards and required best practices are in bold.

1. Team Composition

a. Standards

- i. **A veterans court shall comply with the modified version of the 10 key components of drug treatment courts as promulgated by the Buffalo veterans treatment court, which include all of the following essential characteristics:**
 - **Use of a nonadversarial approach; prosecution and defense counsel promote public safety while protecting any participant's due process rights. (MCL 600.1201(1)(b))**
 - **Continuing interdisciplinary education promotes effective veterans treatment court planning, implementation, and operations. (MCL 600.1201(1)(i))**
 - **Forging of partnerships among veterans treatment court, veterans administration, public agencies, and community-based organizations generates local support and enhances veteran treatment court effectiveness. (MCL 600.1201(1)(j))**
- ii. **The circuit court in any judicial circuit or the district court in any judicial district may adopt or institute a veterans treatment court by statute or court rule if the circuit or district enters into a memorandum of understanding with each participating prosecuting attorney in the circuit or district court district, a representative of the criminal defense bar, a representative or representatives of community treatment providers, a representative or representatives of veterans service organizations in the circuit or district court district, and a representative or representatives of the United States Department of Veterans Affairs. However, the memorandum of understanding will only be required to include the prosecuting attorney if the veterans treatment court will include in its program individuals who may be eligible for discharge and dismissal of an offense, a delayed sentence, deferred entry of judgment, or a sentence**

involving deviation from the sentencing guidelines. The memorandum of understanding also may include other parties considered necessary, such as any other prosecutor in the circuit or district court district, local law enforcement, the probation departments in that circuit or district, the local substance abuse coordinating agency for that circuit or district, a domestic violence service provider program that receives funding from the state domestic violence prevention and treatment board, a representative or representatives of the local court funding unit, and community corrections agencies in that circuit or district. The memorandum of understanding shall describe the role of each party, and the conditions for which the memorandum of understanding must be renewed and amended.¹⁷ (MCL 600.1201(2))

- iii. The veterans treatment court shall cooperate with, and act in a collaborative manner with, the prosecutor, defense counsel, treatment providers, the local substance abuse coordinating agency for that circuit or district, probation departments, the United States Department of Veterans Affairs, local VSOs in that circuit or district, and, to the extent possible, local law enforcement, the department of corrections, and community corrections agencies. (MCL 600.1206(3))

b. Best Practices

- i. A dedicated multidisciplinary team of professionals manages the day-to-day operations of the veterans treatment court, including reviewing participant progress during precourt staff meetings and status hearings, contributing observations and recommendations within the team members' respective areas of expertise, and overseeing the delivery of legal, treatment, and supervision services.
- ii. The team comprises representatives from all partner agencies involved in creating the program, including but not limited to a judge or judicial officer, program coordinator, prosecutor, defense counsel representative, treatment representative, community supervision officer, veterans justice outreach specialist, and law enforcement officer.
 - Drug courts enjoy significantly greater reductions in recidivism and significantly higher cost savings when all team members regularly participate in staffing meetings and review hearings. (Carey, Mackin, & Finigan, 2012) (Cissner, et al., 2013)
 - When law enforcement is a member of the drug court team, drug courts can reduce recidivism by 87 percent and increase cost savings by 44 percent. (Carey, Mackin, & Finigan, 2012)

¹⁷ See Appendix I. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VTC-ProgramMOU.pdf>.

c. Promising Practices

- i. An independent evaluator serves as a member of the veterans treatment court team.
 - The evaluator is responsible for developing reliable and valid methodologies to study the effectiveness of the treatment court. It is necessary for all treatment courts to regularly evaluate program effectiveness. This is primarily done through three evaluations: process, outcome, and cost-benefit. While an evaluator is an essential team member of any treatment court, it is not necessarily a position for a full-time employee in every program. Instead, the role can be filled at the regional or local level. The evaluator, while generally considered a part of the team, does not participate in team reviews as it compromises the objectivity of the evaluator and the integrity of the evaluation process. (Minnesota Supreme Court, 2006)
 - Courts should consider partnering with local colleges or universities to find a qualified evaluator.

2. Staffing Meetings and Review Hearings

a. Standards

- i. **A veterans treatment court shall provide an individual admitted to the court with all of the following:**
 - **Consistent, continual, and close monitoring and interaction with the court, treatment providers, probation, and the participant. (MCL 600.1207(1)(a))**
 - **Periodic evaluation assessments of the participant's circumstances and progress in the program. (MCL 600.1207(1)(d))**

b. Best Practices

- i. **Team members consistently attend precourt staff meetings to review participant progress, determine appropriate actions to improve outcomes, and prepare for status hearings in court.**
 - When all team members consistently attend staffing meetings, drug courts can lower recidivism by 50 percent, and are nearly twice as cost-effective as those programs where not all team members attend. (Carey, Mackin, & Finigan, 2012)
 - When a representative from treatment attended staffing meetings, recidivism was reduced by 105 percent. (Carey, Mackin, & Finigan, 2012)

- ii. **Team members attend review status hearings on a consistent basis. During the status review hearings, team members contribute relevant information or recommendations when requested by the judge or as necessary to improve outcomes or protect participants' legal rights.**
 - Drug courts were able to significantly reduce recidivism and improve cost-savings when the judge, attorneys, treatment, probation, and coordinator all attended status review hearings. (Carey, Mackin, & Finigan, 2012)
 - When a representative from treatment attended status review hearings, recidivism was reduced 100 percent over drug courts that did not have a treatment representative attend. (Carey, Mackin, & Finigan, 2012)
 - When a law enforcement officer attended status review hearings, recidivism was reduced 83 percent over drug courts that did not have a law enforcement officer attend. (Carey, Mackin, & Finigan, 2012)

c. Promising Practices

- i. When precourt staffing meetings are closed to the participant and the public, the participant should be notified in the veterans treatment court agreement and waiver.

3. Communication and Decision Making

a. Standards

- i. **The judge is the final arbiter of factual controversies and makes the final decision concerning the imposition of incentives or sanctions that affect a participant's legal status or liberty.**
 - **The judicial power of the state is vested exclusively in one court of justice, which shall be divided into one supreme court, one court of appeals, one trial court of general jurisdiction known as the circuit court, one probate court, and courts of limited jurisdiction. (Michigan Constitution, Article VI, Section 1)**
 - **In order to continue to participate in and successfully complete a veterans treatment court program, an individual shall make all payments ordered pursuant to MCL 600.1208 (1)(a-d) and comply with all court orders, violations of which may be sanctioned within the court's discretion. (MCL 600.1208(1)(e))**
 - **The veterans treatment court shall be notified if the veterans treatment court participant is accused of a new crime, and the judge shall consider whether to terminate the participant's participation in the veterans treatment program in conformity with the memorandum of understanding under section 1201(2). If the participant is convicted of a felony for an offense that occurred after the defendant is admitted to veterans treatment court, the judge shall terminate the participant's participation in the veterans treatment court. (MCL 600.1208(2))**

- ii. **If the court determines that scientific, technical, or other specialized knowledge will assist the trier of fact to understand the evidence or to determine a fact in issue, a witness qualified as an expert by knowledge, skill, experience, training, or education may testify thereto in the form of an opinion or otherwise if (1) the testimony is based on sufficient facts or data, (2) the testimony is the product of reliable principles and methods, and (3) the witness has applied the principles and methods reliably to the facts of the case. (Michigan Rules of Evidence, Rule 702)**
 - Information relating to addiction, mental health treatment, and substance abuse treatment is typically beyond the knowledge of laypersons, so this information must usually be introduced by a qualified expert. (National Association of Drug Court Professionals, 2015)

b. Best Practices

- i. **Team members share information as necessary to appraise participants' progress in treatment and compliance with the conditions of veterans treatment court. Team members and the agency they represent execute memoranda of understanding specifying what information will be shared among team members.¹⁸**
 - Several studies have indicated that participants and staff alike rate communication among team members as one of the most important factors for success in drug court. (National Association of Drug Court Professionals, 2015)
 - Please also see Chapter 3, Confidentiality for information on appropriate scope for information sharing.
- ii. **Team members contribute relevant insights, observations, and recommendations based on their professional knowledge, training, and experience. The judge considers all team members' perspectives before making decisions that affect participants' welfare or liberty interests and explains the rationale for such decisions to team members and participants.**
 - Studies in more than 10 drug courts found that implementing a model designed to improve team communication skills increased job satisfaction and improved program measures such as admission rates, wait times for treatment, and no-show rates.¹⁹ (National Association of Drug Court Professionals, 2015)

¹⁸ See Appendix G. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/ConfidentialityMOU.pdf>.

¹⁹ For additional information on the suggested model, the Network for the Improvement of Addiction Treatment's Organizational Improvement Model, please see page 45 of *Adult Drug Court Best Practice Standards*, Volume 2, published by the National Association of Drug Court Professionals. The model seeks to create an environment where all team members are able to share differing views in a way that is likely to be heeded by others on the team.

Works Cited

- Carey, S., Mackin, J., & Finigan, M. (2012). What works? The ten key components of drug court: Research-based best practices. *Drug Court Review*, 7(1), 6-42.
- Cissner, A., Rempel, M., Franklin, A., Roman, J., Bieler, S., Cohen, R., et al. (2013). *A statewide evaluation of New York's adult drug courts: Identifying which policies work best*. New York: Center for Court Innovation.
- Minnesota Supreme Court, S. (2006, May 16). Retrieved September 1, 2016, from Minnesota Judicial Branch:
http://www.mncourts.gov/documents/0/Public/Problem_Solving_Courts/Drug_Court_Roles.pdf
- National Association of Drug Court Professionals. (2015). *Adult Drug Court Best Practice Standards. Volume II*.
- State of Washington v. Sykes, 339 P. 3d 972 (Washington Supreme Court December 18, 2014).

Chapter 6: Veterans Treatment Court Population and Admission

This chapter discusses screening and eligibility criteria for veterans treatment courts. It can be used to ensure that programs are targeting the proper population among offenders. Specific topics include screening, eligible offenses, assessments, admission to the program and legal outcomes, and transferring supervision. Veterans treatment courts can use this chapter to address their target population, screening and assessment practices, program eligibility requirements, and admission practices.

In order for a program to become a certified veterans treatment court, it must comply with all of the standards and required best practices in this chapter. All standards and required best practices are in bold.

1. Screening

a. Standards

- i. To be eligible for admission to a veterans treatment court, an individual shall cooperate with and complete a preadmissions screening and evaluation assessment and shall agree to cooperate with any future evaluation assessment as directed by the veterans treatment court. A preadmission screening and evaluation assessment shall include all of the following:**
 - A determination of the individual's veteran status. A review of the DD Form 214 "certificate of release or discharge from active duty" satisfies the requirement of this subdivision. (MCL 600.1203(3)(a))**
 - A complete review of the individual's criminal history, and whether the individual has been admitted to, has participated in, or is currently participating in a veterans treatment court, drug treatment court, or other specialty court, whether admitted under this act or a law listed under subsection (2), and the results of the individual's participation. A review of the L.E.I.N. satisfies the requirements of this subdivision unless a further review is warranted. The court may accept other verifiable and reliable information from the prosecution or defense to complete its review and may require the individual to submit a statement as to whether or not he or she has previously been admitted to a veterans treatment court, drug treatment court, or other specialty court, and the results of his or her participation in the prior program or programs. (MCL 600.1203(3)(b))**
 - An assessment of the risk of danger or harm to the individual, others, or the community. (MCL 600.1203(3)(c))**

- A review of the individual's history regarding the use or abuse of any controlled substance or alcohol and an assessment of whether the individual abuses controlled substances or alcohol or is drug or alcohol dependent. It is the intent of the legislature that, to the extent practicable, an assessment under this subdivision shall be a clinical assessment completed by the VA. (MCL 600.1203(3)(d))
 - A review of the individual's mental health history. It is the intent of the legislature that, to the extent practicable, this assessment shall be a clinical assessment completed by the VA. (MCL 600.1203(3)(e))
 - A review of any special needs or circumstances of the individual that may potentially affect the individual's ability to receive substance abuse treatment and follow the court's orders. (MCL 600.1203(3)(f))
- ii. The court may request that the department of state police provide to the court information contained in the L.E.I.N. pertaining to an individual applicant's criminal history for the purposes of determining an individual's admission into the veterans treatment court and general criminal history review, including whether the individual has previously been admitted to and participated in a veterans treatment court, drug treatment court, or other specialty court under this act or a statute listed under subsection (2), and the results of the individual's participation. The department of state police shall provide the information requested by a veterans treatment court under this subsection. (MCL 600.1203(5))

b. Best Practices

- i. Use clinical assessments instead of screening tools to determine diagnoses.
- Substance abuse screening tools do not accurately identify diagnoses. (Greenfield & Hennessy, 2008)

c. Promising Practices

- i. The veterans treatment court gives careful consideration when deciding whether to accept a defendant who is still active in the National Guard or Reserves.
- ii. Those serving in the National Guard or Reserves can be called to training, called to active duty, or deployed for extended periods of time. These assignments may keep a participant away from the veterans treatment court, unable to participate in hearings, treatment, or testing. Such an interruption in services can affect the ability to complete the program, so courts should consider a guardsman's or reservist's ability to participate.

2. Eligible Offenses

a. Standards

- i. “Violent offender” means an individual who is currently charged with or has pled guilty to an offense involving the death of, or a serious bodily injury to, any individual, whether or not any of these circumstances are an element of the offense, or an offense that is criminal sexual conduct in any degree. (MCL 600.1200(k))**
- ii. A veterans treatment court shall determine whether an individual may be admitted to the veterans treatment court. No individual has a right to be admitted into a veterans treatment court. However, an individual is not eligible for admission into a veterans treatment court if he or she is a violent offender. An individual is eligible for admission into a veterans treatment court if he or she has previously had an offense discharged or dismissed as a result of participation in a veterans treatment court, drug treatment court, or other specialty court, but he or she shall not have a subsequent offense discharged or dismissed as a result of participating in the veterans treatment court. (MCL 600.1203(1))**
- iii. In addition to admission to a veterans treatment court under this act, an individual who is eligible for admission under this act may also be admitted to a veterans treatment court under any of the following circumstances:**
 - The individual has been assigned the status of youthful trainee under section 11 of chapter II of the code of criminal procedure, 1927 PA 175, MCL 762.11. (MCL 600.1203(2)(a))**
 - The individual has had criminal proceedings against him or her deferred and has been placed on probation under any of the following:**
 - a. Section 7411 of the public health code, 1978 PA 368, MCL 333.7411 or a local ordinance or another law of this state, another state, or the United States that is substantially similar to that section. (MCL 600.1203 (2)(b)(i))**
 - b. Section 4a of chapter IX of the code of criminal procedure, 1927 PA 175, MCL 769.4a. (MCL 600.1203 (2)(b)(ii))**
 - c. Section 430 of the Michigan penal code, 1931 PA 328, MCL 750.430 or a local ordinance or another law of this state, another state, or the United States that is substantially similar to that section. (MCL 600.1203(2)(b)(iii))**
 - d. Section 350a of the Michigan penal code, 1931 PA 328, MCL 750.350a and 750.430, or a local ordinance of another law of this state, another state, or the United States that is substantially similar to those sections. (MCL 600.1203(2)(b)(iv))**

- iv. In order to be considered for placement in the [DWI/sobriety court interlock] program, an individual must have been convicted of either of the following:
- Two or more convictions for violating section 625(1) or (3) of the Michigan vehicle code, 1949 PA 300, MCL 257.625, or a local ordinance of this state substantially corresponding to section 625(1) or (3) of the Michigan vehicle code, 1949 PA 300, MCL 257.625. (MCL 600.1084(4)(a))
 - One conviction for violating section 625(1) or (3) of the Michigan vehicle code, 1949 PA 300, MCL 257.625, or a local ordinance of this state substantially corresponding to section 625(1) or (3) of the Michigan vehicle code, 1949 PA 300, MCL 257.625, preceded by 1 or more convictions for violating a local ordinance or law of another state substantially corresponding to section 625(1), (3), or (6) of the Michigan vehicle code, 1949 PA 300, MCL 257.625, or a law of the United States substantially corresponding to section 625(1), (3), or (6) of the Michigan vehicle code, 1949 PA 300, MCL 257.625. (MCL 600.1084(4)(b))

3. Clinical Substance Use and Mental Health Assessments

a. Standards

- i. To be eligible for admission to a veterans treatment court, an individual shall cooperate with and complete a preadmissions screening and evaluation assessment and shall agree to cooperate with any future evaluation assessment as directed by the veterans treatment court. A preadmission screening and evaluation assessment shall include all of the following:
- An assessment of the risk of danger or harm to the individual, others, or the community. (MCL 600.1203(3)(c))
 - A review of the individual's history regarding the use or abuse of any controlled substance or alcohol and an assessment of whether the individual abuses controlled substances or alcohol or is drug or alcohol dependent. It is the intent of the legislature that, to the extent practicable, an assessment under this subdivision shall be a clinical assessment completed by the VA. (MCL 600.1203(3)(d))
 - A review of the individual's mental health history. It is the intent of the legislature that, to the extent possible, this assessment shall be a clinical assessment completed by the VA. (MCL 600.1203(3)(e))
 - A review of any special needs or circumstances of the individual that may potentially affect the individual's ability to receive substance abuse treatment and follow the court's orders. (MCL 600.1203(3)(f))

- ii. **A veterans treatment court may hire or contract with licensed or accredited treatment providers, in consultation and cooperation with the local substance abuse coordinating agency, and other appropriate persons to assist the veterans treatment court in fulfilling its requirements under this chapter, including, but not limited to, an investigation of an individual's background or circumstances, or a clinical evaluation of an individual, before the individual is admitted or permitted to participate in a veterans treatment court. It is the intent of the legislature that, services, including, but not limited to, clinical evaluations, drug and alcohol treatment, and mental health services, shall be provided by the VA to the extent that is practical. (MCL 600.1202)**

b. Best Practices

- i. **Clinical assessments use validated tools.**
 - The predictive criterion validity of actuarial assessments of major risk and/or need factors greatly exceeds the validity of unstructured clinical judgment. (Andrews, Bonta, & Wormith, 2006).
 - Drug courts that use better assessment practices have better outcomes (Shaffer, 2010).

4. Risk and Need Assessment

a. Best Practices

- i. **The veterans treatment court program accepts participants that are both high-risk and high-need.**
 - Drug courts that focus on high-risk and high-need participants reduce crime nearly twice as much as those focusing on less serious participants. (Lowenkamp, Holsinger, & Latessa, 2005)
- ii. **Use a standardized risk and needs assessment to identify the expected likelihood of a particular outcome (e.g., recidivism) over a specified period of time (e.g., one year) for an individual.**
 - Standardized assessment tools are reliable and valid with regard to identifying those who are likely to succeed on probation. (Miller & Shutt, 2001)
 - Providing substance abuse treatment to low-risk offenders can lead to higher rates of recidivism. (Lowenkamp & Latessa, 2004)
 - Exposing low-risk or low-need participants to high-risk or high-need offenders in residential facilities or treatment groups can make their outcomes worse by introducing them to antisocial peers and disrupting their prosocial activities, such as work. (Lowenkamp & Latessa, 2004)
- iii. **Ensure that the validation sample of the risk and needs assessment is similar to the veterans treatment court's population.**
 - Different racial or ethnic groups interpret the same assessment questions differently. (Carle, 2009)

- Males and females show differences in the prediction of substance use dependence. (Perez & Wish, 2011)
 - DWI offenders require different assessments than drug offenders. (Vlavianos, Floerke, Harrison, & Carey, 2015)
- iv. Reexamine dynamic risk factors after program admission.
- Assessments completed within the month preceding the participant's failure have greater accuracy than ones done much earlier. (Lloyd, Hanson, & Serin, 2015)

b. Promising Practices

- i. The National Drug Court Institute published a [Drug Court Practitioner Fact Sheet](#) that provides recommended tools regarding selecting and using risk and need assessments.

5. Legal Outcome

a. Standards

- i. The circuit court in any judicial circuit or the district court in any judicial district may adopt or institute a veterans treatment court by statute or court rule if the circuit or district enters into a memorandum of understanding with each participating prosecuting attorney in the circuit or district court district, a representative of the criminal defense bar, a representative or representatives of community treatment providers, a representative or representatives of veterans service organizations in the circuit or district court district, and a representative or representatives of the United States Department of Veterans Affairs. However, the memorandum will only be required to include the prosecuting attorney if the veterans treatment court will include in its program individuals who may be eligible for discharge and dismissal of an offense, a delayed sentence, deferred entry of judgment, or a sentence involving deviation from the sentencing guidelines. The memorandum of understanding also may include other parties considered necessary, such as any other prosecutor in the circuit or district court district, local law enforcement, the probation departments in that circuit or district, the local substance abuse coordinating agency for that circuit or district, a domestic violence service provider program that receives funding from the state domestic violence prevention and treatment board, a representative or representatives of the local court funding unit, and community corrections agencies in that circuit or district. The memorandum of understanding shall describe the role of each party, and the conditions for which the memorandum of understanding must be renewed and amended.²⁰ (MCL 600.1201(2))

²⁰ See Appendix I. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VTC-ProgramMOU.pdf>.

- ii. An individual who may be eligible for discharge and dismissal of an offense, delayed sentence, deferred entry of judgment, or deviation from the sentencing guidelines shall not be admitted to a veterans treatment court unless the prosecutor first approves the admission of the individual into the veterans treatment court in conformity with the memorandum of understanding under section 1201(2). (MCL 600.1205(2))
- iii. An individual shall not be admitted to, or remain in, a veterans treatment court under an agreement that would permit the discharge or dismissal of a traffic offense upon successful completion of the veterans treatment court program. (MCL 600.1205(3))

6. Admission Factors

a. Standards

- i. If the individual being considered for admission to a veterans treatment court is charged in a criminal case, his or her admission is subject to all of the following conditions:²¹
 - The offense or offenses allegedly committed by the individual are generally related to the military service of the individual, including the abuse, illegal use, or possession of a controlled substance or alcohol, or mental illness that arises as a result of service. (MCL 600.1205(1)(a))
 - The individual pleads guilty to the charge or charges on the record. (MCL 600.1205(1)(b))
 - The individual waives in writing the right to a speedy trial, the right to representation by an attorney at veterans treatment court review hearings, and, with the agreement of the prosecutor, the right to a preliminary examination. (MCL 600.1205(1)(c))
 - The individual signs a written agreement to participate in the veterans treatment court. (MCL 600.1205(1)(d))
- ii. In addition to rights accorded a victim under the William Van Regenmorter crime victim's rights act, 1985 PA 87, MCL 780.751 to 780.834, the veterans treatment court shall permit any victim of the offense or offenses of which the individual is charged, any victim of a prior offense of which that individual was convicted, and members of the community in which the offenses were committed or in which the defendant resides to submit a written statement to the court regarding the advisability of admitting the individual into the veterans treatment court. (MCL 600.1205(4))
- iii. An individual who has waived his or her right to a preliminary examination and has pled guilty as part of his or her application to a veterans treatment court and who is not admitted to a veterans treatment court shall be permitted to withdraw his or her plea and is entitled to a preliminary examination. (MCL 600.1205(5))

²¹ See Appendix J. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VTC-AgreementToParticipate.pdf>.

b. Best Practices

- i. Use only objective criteria when determining suitability for veterans treatment court.**
 - Subjective screenings after determining legal and clinical eligibility for the drug court program have no beneficial impact on drug court graduation rates or postprogram recidivism. (Carey & Perkins, 2008)
 - Eliminating subjective screening results in cost savings. (Bhati, Roman, & Chalfin, 2008)

7. Findings on the Record or in the Court File

a. Standards

- i. Before an individual is admitted into a veterans treatment court, the court shall find on the record or place a statement in the court file establishing all of the following:²²**
 - That the individual is a veteran. (MCL 600.1204(a))
 - That the individual is dependent upon or abusing drugs or alcohol, or suffers from a mental illness, and is an appropriate candidate for participation in the veterans treatment court. (MCL 600.1204(b))
 - That the individual understands the consequences of entering the veterans treatment court and agrees to comply with all court orders and requirements of the court's program and treatment providers. (MCL 600.1204(c))
 - That the individual is not an unwarranted or substantial risk to the safety of the public or any individual, based upon the screening and assessment or other information presented to the court. (MCL 600.1204(d))
 - That the individual is not a violent offender. (MCL 600.1204(e))
 - That the individual has completed a preadmission screening and evaluation assessment under section 1203(3) and has agreed to cooperate with any future evaluation assessment as directed by the veterans treatment court. (MCL 600.1204(f))
 - The individual meets the requirements, if applicable, of a statute listed under section 1203(2). (MCL 600.1204(g))
 - The terms, conditions, and duration of the agreement between the parties, and the outcome for the participant of the veterans treatment court upon successful completion by the participant or termination of participation. (MCL 600.1204(h))

²² See Appendix L. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VTC-AdmissionConditionStatement.pdf>.

8. Program Entry

a. Best Practices

- i. Expedite the court process to quickly accept participants into the veterans treatment court.
 - When the time between arrest and program entry is 50 days or less, programs see reductions in recidivism. (Carey, Mackin, & Finigan, 2012).

9. Transfers

a. Standards

- i. A court that has adopted a veterans treatment court under this section may accept participants from any other jurisdiction in this state based upon either the residence of the participant in the receiving jurisdiction or the unavailability of a veterans treatment court in the jurisdiction where the participant is charged. The transfer can occur at any time during the proceedings, including, but not limited to, prior to adjudication. The receiving court shall have jurisdiction to impose sentence, including, but not limited to, sanctions, incentives, incarceration, and phase changes. A transfer under this subsection is not valid unless it is agreed to by all of the following:
 - The defendant or respondent. (MCL 600.1201(4)(a))
 - The attorney representing the defendant or respondent. (MCL 600.1201(4)(b))
 - The judge of the transferring court and the prosecutor of the case. (MCL 600.1201(4)(c))
 - The judge of the receiving veterans treatment court and the prosecutor of a court funding unit of the veterans treatment court. (MCL 600.1201(4)(d))
- ii. Beginning January 1, 2018, a case may be transferred totally from 1 court to another court for the defendant's participation in a state-certified treatment court. A total transfer may occur prior to or after adjudication, but must not be consummated until the completion and execution of a memorandum of understanding that must include, but need not be limited to, all of the following:²³
 - A detailed statement of how all funds assessed to defendant will be accounted for, including, but not necessarily limited to, the need for a receiving state-certified treatment court to collect funds and remit them to the court of original jurisdiction.

²³ See Appendix M. This model document is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/ModelPSC-TransferJurisdiction.pdf>.

- A statement providing which court is responsible for providing information to the department of state police, as required under section 3 of 1925 PA 289, MCL 28.243, and forwarding an abstract to the secretary of state for inclusion on the defendant's driving record.
- A statement providing where jail sanctions or incarceration sentences would be served, as applicable.
- A statement that the defendant has been determined eligible by and will be accepted into the state-certified treatment court upon transfer.
- The approval of all of the following:
 - a. The chief judge and assigned judge of the receiving state-certified treatment court and the court of original jurisdiction.
 - b. A prosecuting attorney from the receiving state-certified treatment court and the court of original jurisdiction.
 - c. The defendant.

b. Promising Practices

- i. For transfers under MCL 600.1201(4), use the State Court Administrative Office's recommended procedure to transfer supervision.
 - [Administrative Memorandum 2015-01](#) identifies step-by-step procedures for transferring supervision to a problem-solving court (Administrative Memoranda, 2015).
 - The SCAO provides a [Frequently Asked Questions](#) document to assist courts in dealing with transfers.

Works Cited

- Andrews, D., Bonta, J., & Wormith, J. (2006). The recent past and near future of risk and/or need assessment. *Crime & Delinquency*, 52(1), 7-27.
- Bhati, A., Roman, J., & Chalfin, A. (2008). *To treat or not to treat: Evidence on the prospects of expanding treatment to drug-involved offenders*. Washington DC: The Urban Institute.
- Bruns, E., Pullmann, M., Wiggins, E., & Watterson, K. (2011). *King County Family Treatment Court Outcome Evaluation: Final Report*. Seattle, WA: Division of Public Behavioral Health and Justice Policy.
- Carey, S., & Perkins, T. (2008). *Methamphetamine users in Missouri drug courts: Program elements associated with success, final report*. Portland, OR: NPC Research.
- Carey, S., Mackin, J., & Finigan, M. (2012). What works? The ten key components of drug court: Research-based best practices. *Drug Court Review*, 7(1), 6-42.
- Carle, A. (2009). Assessing the adequacy of self-reported alcohol abuse measurement across time and ethnicity: cross-cultural equivalence across Hispanic and Caucasians in 1992, non-equivalence in 2001-2002. *BMC Public Health*.
- Downey, P., & Roman, J. (2010). *A Bayesian meta-analysis of drug court cost-effectiveness*. Washington DC: Urban Institute.
- Greenfield, S., & Hennessy, G. (2008). Assessment of the patient. In M. Galanter, & H. Kleber, *Textbook of substance abuse treatment* (4th ed., pp. 55-78). Washington, DC: American Psychiatric Publishing.
- Grella, C., Needell, B., Shi, Y., & Hser, Y. (2009). Do drug treatment services predict reunification outcomes of mothers and their children in child welfare? *Journal of Substance Abuse Treatment*, 36, 278-293.
- Lloyd, C., Hanson, R., & Serin, R. (2015). "Dynamic" stipulates that re-assessment matters: Examining the hypothesis that repeated measurement enhances the prediction of recidivism. *American Psychology-Law Society Annual Conference*. San Diego, CA.
- Lowenkamp, C., & Latessa, E. (2004). Understanding the risk principle: How and why correctional interviews can harm low-risk offenders. *Topics in Community Corrections*, 3-8.
- Lowenkamp, C., Holsinger, A., & Latessa, E. (2005). Are drug courts effective? A meta-analytic review. *Journal of Community Corrections*(Fall), 5-28.
- Marlowe, D., Festinger, D., Dugosh, K., Arabia, P., & Kirby, K. (2008). An effectiveness trial of contingency management in a felony preadjudication drug court. *Journal of Applied Behavior Analysis*, 41(4), 565-577.
- Miller, J., & Shutt, J. (2001). Considering the need for empirically grounded drug court screening mechanisms. *Journal of Drug Issues*, 31(1), 91-106.
- Perez, D., & Wish, E. (2011). Gender differences in the validity of the Substance Abuse Subtle Screening Inventory - 3 (SASSI-3) with a criminal justice population. *International Journal of Offender Therapy & Comparative Criminology*, 476-491.
- Rice, M., Harris, G., & Cormier, C. (1992). Evaluation of a Maximum Security Therapeutic Community for Psychopaths and Other Mentally Disordered Offenders. *Law and Human Behavior*, 399-412.

- Shaffer, D. (2010). Looking inside the black box of drug courts: A meta-analytic review. *Justice Quarterly*, 28(3), 493-531.
- State Court Administrative Office. (2015, June 3). *Administrative Memoranda*. Retrieved May 9, 2016, from <http://courts.mi.gov/Administration/SCAO/Resources/Documents/Administrative-Memoranda/2015-01.pdf>
- Vlavianos, R., Floerke, S., Harrison, P., & Carey, S. (2015). Retrieved October 12, 2016, from NPC Research: http://npcresearch.com/wp-content/uploads/DWI-and-drug-court-research-best-practices_NADCP-2015.pdf
- Worcel, S., Furrer, C., Green, B., & Rhodes, B. (2006). *Family treatment drug court evaluation: Final Phase I study report*. Portland, OR: NPC Research.

Chapter 7: Drug and Alcohol Testing

This chapter addresses drug and alcohol testing in veterans treatment court. Specific topics include randomization, frequency, methods for collection and testing, the use of scientific information, and chain of custody. In addition to following these standards and best practices, courts should consult the *Ten Principles of a Good Testing Program*,²⁴ promulgated by the National Drug Court Institute. The Michigan Association of Treatment Court Professionals published the [*MATCP Drug Testing Manual, 2nd Edition*](#), as a reference for treatment courts.

In order for a program to become a certified veterans treatment court, it must comply with all of the standards and required best practices in this chapter. All standards and required best practices are in bold.

1. General

a. Standards

- i. **A veterans treatment court shall provide an individual admitted to the court with all of the following:**
 - **Consistent, continual, and close monitoring and interaction with the court, treatment providers, probation, and the participant. (MCL 600.1207(1)(a))**
 - **Mandatory periodic and random testing for the presence of any controlled substance or alcohol in a participant's blood, urine, or breath, using, to the extent practicable, the best available, accepted, and scientifically valid methods. (MCL 600.1207(1)(c))**
 - **Periodic evaluation assessments of the participant's circumstances and progress in the program. (MCL 600.1207 (1)(d))**
- ii. **Any statement or other information obtained as a result of participating in assessment, treatment, or testing while in a veterans treatment court is confidential and is exempt from disclosure under the freedom of information act, 1976 PA 442, MCL 15.231 to 15.246, and shall not be used in a criminal prosecution, except for a statement or information that reveals criminal acts other than, or inconsistent with, personal drug use. (MCL 600.1207(2))**

²⁴ See Appendix N.

2. Randomization

a. Standards

- i. A veterans treatment court shall provide an individual admitted to the court with all of the following:
 - **Mandatory periodic and random testing for the presence of any controlled substance or alcohol in a participant's blood, urine, or breath, using, to the extent practicable, the best available, accepted, and scientifically valid methods. (MCL 600.1207(1)(c))**

b. Best Practices

- i. **The probability of being tested on weekends and holidays is the same as other days.**
 - Weekends and holidays are high-risk times for drug and alcohol use. Providing a respite from detection during these high-risk times reduces the randomness of testing and undermines the central aims of a drug-testing program. (Kirby, Lamb, Iguchi, Husband, & Platt, 1995) (Marlatt & Gordon, 1985) (American Society of Addiction Medicine, 2013)
- ii. Urine tests are delivered no more than eight hours after a participant is notified that a test has been scheduled. (National Association of Drug Court Professionals, 2015) (Auerbach, 2007)
- iii. Tests with short detection windows such as oral fluid tests should be delivered no more than four hours after being notified that a test was scheduled. (National Association of Drug Court Professionals, 2015)

3. Frequency and Breadth of Testing

a. Standards

- i. A veterans court shall comply with the modified version of the 10 key components of drug treatment courts as promulgated by the Buffalo veterans treatment court, which include all of the following essential characteristics:
 - **Monitoring of abstinence by frequent alcohol and other drug testing. (MCL 600.1201(1)(e))**

b. Best Practices

- i. **For participants with a substance use disorder, urine testing is performed at least twice per week until participants are in the last phase of the program and preparing for graduation.**
 - In a multisite study of approximately 70 drug courts, programs performing urine testing at least twice per week in the first phase lowered recidivism by 38 percent and were 61 percent more cost-

effective than programs testing less frequently. (Carey, Mackin, & Finigan, 2012)

- The most effective drug courts perform urine drug testing at least twice per week for the first several months of the program. (Carey & Perkins, 2008)
- ii. **For participants with no indication of a substance use disorder, urine testing is performed at least once per week in the first phase of the program.**
 - Mental health courts that tested new clients at least once a week, if not more, saw a decrease in jurisdictional crime rate. (Bullard, 2014)
- iii. **Test specimens are examined for all unauthorized substances of abuse that are suspected to be used by participants. Randomly selected specimens are tested periodically for a broader range of substances to detect new substances of abuse that might be emerging in the population.**
 - Participants can easily evade detection of their substance use by switching to drugs that have similar effects but are not detected by the test. (American Society of Addiction Medicine, 2013)
 - Because new drugs of abuse are constantly being sought out by offenders to cheat drug tests, treatment courts should frequently and randomly examine samples for a wide range of potential substances of abuse. (American Society of Addiction Medicine, 2013)
- iv. Tests that measure substance use over extended periods of time, such as ankle monitors, are applied for at least 90 consecutive days followed by urine or other intermittent test methods.
 - Research indicates that use of an alcohol tether device may deter alcohol consumption and alcohol-impaired driving among recidivist DWI offenders if it is worn for at least 90 days. (Flango & Cheeseman, 2009) (Tison, Nichols, Casanova-Powell, & Chaudhary, 2015)

c. Promising Practices

- i. Drug and alcohol testing continues uninterrupted to determine whether relapse occurs as other treatment and supervision services are adjusted.
 - Although research has not occurred on this issue, logic dictates that continued testing provides the greatest assurance that participants remain abstinent. (National Association of Drug Court Professionals, 2015)

4. Scientifically Valid Drug Testing Methods

a. Standards

- i. A treatment veterans court shall provide an individual admitted to the court with all of the following:
 - **Mandatory periodic and random testing for the presence of any controlled substance or alcohol in a participant's blood, urine, or breath, using, to the extent practicable, the best available, accepted, and scientifically valid methods. (MCL 600.1207(1)(c))**
- ii. **If the court determines that scientific, technical, or other specialized knowledge will assist the trier of fact to understand the evidence or to determine a fact in issue, a witness qualified as an expert by knowledge, skill, experience, training, or education may testify thereto in the form of an opinion or otherwise if (1) the testimony is based on sufficient facts or data, (2) the testimony is the product of reliable principles and methods, and (3) the witness has applied the principles and methods reliably to the facts of the case. (Michigan Rules of Evidence, Rule 702. Adopted from the Federal Rules of Evidence, Rule 702. Based on Daubert v. Merrell Dow Pharmaceuticals)**

b. Best Practices

- i. **A veterans treatment court uses scientifically valid and reliable testing procedures.**
 - To be admissible as evidence in a legal proceeding, drug and alcohol test results must be derived from scientifically valid and reliable methods. (Meyer, 2011)
 - Appellate courts have recognized the scientific validity of several commonly used methods for analyzing urine, including gas chromatography/mass spectrometry (GC/MS); liquid chromatography/tandem mass spectrometry (LC/MS/MS); the enzyme multiple immunoassay technique (EMIT); and some sweat, oral fluid, hair, and ankle-monitor tests. (Meyer, 2011)
 - Appellate courts have recognized the scientific validity of ethyl glucuronide (ETG) testing. (Lawrence)
- ii. **If a participant denies substance use in response to a positive screening test, a portion of the same specimen is subjected to confirmatory analysis using an instrumented test, such as GC/MS or LC/MS. Unless a participant admits to using the drug identified by the screening procedure, confirmation of presumptive positive tests is mandatory.**
 - Gas chromatography-mass spectrometry (GC/MS) provides chemical fingerprint identification of drugs and is recognized as the definitive confirmation technology. (Cary, 2011)
 - Confirmation with an instrumented test virtually eliminates the odds of a false positive result, assuming the sample was collected and stored properly. (Auerbach, 2007)

- It is necessary to validate positive screening results in order to rule out the potential of a false positive by performing a confirmation procedure. (Cary, 2011)
- iii. Confirmatory tests are not withheld due to the participant's inability to pay.**
- Courts commonly require participants to pay the cost of confirmation tests if the initial screening result is confirmed. (Cary, 2011) (Meyer, 2011)
- iv. Metabolite levels are not used as evidence of new substance use or changes in participants' substance use patterns.**
- Quantitative metabolite levels can vary considerably based on a number of factors, including the total fluid content in urine or blood. (Cary, 2004)
 - Numeric results do not accurately discriminate between whether a participant's overall drug level is increasing or decreasing even if compared to previous urine drug concentrations from the same client and for the same drug. (Cary, 2004)
 - The routine use of urine drug levels by court personnel in an effort to define substance abuse behavior and formulate appropriately measured sanctions is a practice that can result in inappropriate, factually unsupportable conclusions and a decision-making process that lacks a sound scientific foundation. (Cary, 2011)
- v. Test specimens are examined routinely for evidence of dilution and adulteration.**
- The temperature of each urine specimen should be examined immediately upon collection. An unusual temperature might suggest adulteration or tampering. (National Association of Drug Court Professionals, 2015)
 - Under normal conditions, urine specimens should be between 90 and 100 degrees Fahrenheit within four minutes of collection; a lower or higher temperature likely indicates a deliberate attempt at deception. (American Society of Addiction Medicine, 2013)
 - Specimens should be tested for creatinine and specific gravity. A creatinine level below 20 mg/dL is rare and is a reliable indicator of an intentional effort at dilution or excessive fluid consumption. (American Society of Addiction Medicine, 2013)

5. Witnessed Collection

a. Standards

- i. The person taking the sample shall be of the same sex as the offender providing the sample, unless an emergency condition requires otherwise. (Michigan Department of Corrections Policy Directive 03.03.115)**
- ii. Breathalyzers must be calibrated according to certification standards established by the U.S. Departments of Transportation (DOT) and Health and Human Services (HHS) and/or the state toxicologist. The test must be administered by breath alcohol technicians who are trained in the use and interpretation of breath alcohol results. (U.S. Department of Justice, Office of Justice Programs, Drug Courts Program Office & American University, 2000)**

b. Best Practices

- i. Collection of test specimens is witnessed directly by a staff person who has been trained to prevent tampering and substitution of fraudulent specimens.**
 - The most effective way to ensure that the sample collection is valid and to avoid tampering is to ensure the collection is witnessed directly by someone who has been properly trained. (American Society of Addiction Medicine, 2013) (Cary, 2011)**

c. Promising Practices

- i. Barring exigent circumstances, participants are not permitted to undergo independent drug or alcohol testing in lieu of being tested by trained personnel assigned to or authorized by the veterans treatment court.**
 - In an effort to refute court-mandated drug-testing results, on occasion, clients may attempt to obtain testing from alternative sources not under the court's control or supervision. (Cary, 2011)**
 - The success of any treatment court will depend, in part, on the reliable monitoring of substance use. (National Association of Drug Court Professionals, 2015)**

6. Chain of Custody and Results

a. Standards

- i. If the court determines that scientific, technical, or other specialized knowledge will assist the trier of fact to understand the evidence or to determine a fact in issue, a witness qualified as an expert by knowledge, skill, experience, training, or education may testify thereto in the form of an opinion or otherwise if (1) the testimony is based on sufficient facts or data, (2) the testimony is the product of reliable principles and methods, and (3) the witness has applied the principles and methods reliably to the facts of the case. (Michigan Rules of Evidence, Rule 702. Adopted from the Federal Rules of Evidence, Rule 702. Based on Daubert v. Merrell Dow Pharmaceuticals)**
- ii. Under Rule 702, veterans treatment courts are required to follow generally accepted chain-of-custody procedures when handling test specimens. (Meyer, 2011)**

b. Best Practices

- i. A chain-of-custody form is completed once a urine sample has been collected. This form ensures the identity and integrity of the sample through transport, testing, and reporting of results. (Kadehjian, 2010)**
- ii. Test results, including the results of confirmation testing, are available to the veterans treatment court within 48 hours of sample collection.**
 - A study of approximately 70 drug courts reported significantly greater reductions in recidivism and significantly greater cost benefits when the teams received drug and alcohol test results within 48 hours of sample collection. (Carey, Mackin, & Finigan, 2012)**

c. Promising Practices

- i. In order to comply with the 48-hour results best practice, veterans treatment courts that use tethers or in-home units should require download at least three times per week.**

Works Cited

- American Society of Addiction Medicine (2013). *Drug testing: A white paper of the American Society of Addiction Medicine (ASAM)*. Chevy Chase: American Society of Addiciton Medicine.
- Auerbach, K. (2007). Drug Testing Methods. In *Drug Courts: A New Approach to Treatment and Rehabilitation* (pp. 215-233). New York: Springer.
- Bullard, C. E., & Thrasher, R. (2014). Evaluating mental health courts by impact on jurisdictional crime rates. *Criminal Justice Policy Review*, 27(3), 227-246.
- Carey, S., & Perkins, T. (2008). *Methamphetamine users in Missouri drug courts: Program elements associated with success, final report*. Portland, OR: NPC Research.
- Carey, S., Mackin, J., & Finigan, M. (2012). What works? The ten key components of drug court: Research-based best practices. *Drug Court Review*, 7(1), 6-42.
- Cary, P. (2004). Urine drug concentrations: The scientific rationale for eliminated the use of drug test levels in drug court proceedings. *NDCI Drug Court Practitioner Fact Sheet 4(1)*, pp. 1-2.
- Cary, P. (2011). The Fundamentals of Drug Testing. In N. D. Institute, *The drug court judicial benchbook* (pp. 113-140). Alexandria: National Drug Court Institute.
- Flango, V., & Cheeseman, F. (2009). The effectiveness of the SCRAM alcohol monitoring device: A preliminary test. *Drug Court Review*, 109-134.
- Kadehjian, L. D. (2010, June). Urine drug testing in drug court programs. *MADCP Newsletter*.
- Kirby, K., Lamb, R., Iguchi, M., Husband, S., & Platt, J. (1995). Situations occasioning cocaine use and cocaine abstinence strategies. *Addiction*, 90(9), 1241-1252.
- Lawrence, K. (n.d.). Retrieved September 9, 2016, from National Drug Court Resource Center: http://www.ndcrc.org/sites/default/files/etg_case_lawdaubert1.pdf
- Marlatt, G., & Gordon, J. (1985). Relapse prevention: Maintenance strategies in the treatment of addictive behaviors. *Clinical Chemistry*, 34(3), 471-473.
- Meyer, W. (2011). Constitutional and legal issues in drug court. In N. D. Institute, *The drug court judicial benchbook* (pp. 159-180). Alexandria: National Drug Court Institute.
- National Assoc. of Drug Court Professionals, Adult Drug Court Best Practice Standards. *Vol. II* (2015).
- Tison, J., Nichols, J., Casanova-Powell, T., & Chaudhary, N. (2015). *Comparative study and evaluation of SCRAM use, recidivism rates, and characteristics (Report No. DOT HS 812 143)*. Washington, D.C.: National Highway Traffic Safety Administration.
- U.S. Department of Justice, Office of Justice Programs, Drug Courts Program Office & American University. (2000, May). *Drug testing in a drug court environment: Drug courts resource series*. Retrieved September 2, 2016, from National Criminal Justice Reference Service: <https://www.ncjrs.gov/pdffiles1/ojp/181103.pdf>

Chapter 8: Treatment

This chapter discusses treatment in veterans treatment court. Specific topics include treatment entry, services, treatment duration, and medication-assisted treatment. Some of the topics in this chapter are also addressed in chapter 2 regarding participant supervision and compliance and in chapter 6 regarding population and admission.

In order for a program to become a certified veterans treatment court, it must comply with all of the standards and required best practices in this chapter. All standards and required best practices are in bold.

1. General and Definition of Veterans Treatment Courts

a. Standards

- i. **“Veterans treatment court” or “veterans court” means a court adopted or instituted under section 1201 that provides a supervised treatment program for individuals who are veterans and who abuse or are dependent upon any controlled substance or alcohol or suffer from a mental illness. (MCL 600.1200(j))**
- ii. **“Mental illness” means a substantial disorder of thought or mood that significantly impairs judgment, behavior, capacity to recognize reality, or ability to cope with the ordinary demands of life, including, but not limited to, post-traumatic stress disorder and psychiatric symptoms associated with traumatic brain injury. (MCL 600.1200(d))**
- iii. **Before an individual is admitted into a veterans treatment court, the court shall find on the record or place a statement in the court file establishing all of the following:**
 - **That the individual is dependent upon or abusing drugs or alcohol, or suffers from a mental illness, and is an appropriate candidate for participation in the veterans treatment court. (MCL 600.1204(b))**
- iv. **If the individual being considered for admission to a veterans treatment court is charged in a criminal case, his or her admission is subject to all of the following conditions:**
 - **The offense or offenses allegedly committed by the individual are generally related to the military service of the individual, including the abuse, illegal use, or possession of a controlled substance or alcohol, or mental illness that arises as a result of service. (MCL 600.1205(1)(a))**
- v. **A veterans treatment court shall provide an individual admitted to the court with all of the following:**
 - **Substance abuse treatment service, relapse prevention services, education, and vocational opportunities as appropriate and practicable. It is the intent of the legislature that, where**

practicable, these services shall be provided by the VA. (MCL 600.1207(1)(f))

- **Mental health treatment services as appropriate and practicable. It is the intent of the legislature that, where practicable, these services shall be provided by the VA. (MCL 600.1207(1)(g))**

b. Best Practices

- i. **A veterans justice outreach specialist (VJO) from the VA is a member of the veterans treatment court team.**
 - VA has developed the veterans justice outreach initiative to provide direct services to veterans in the criminal justice system. VJO staff work with courts to help justice-involved veterans get mental health assessment, treatment planning, and referrals to VA services. (United States Department of Veterans Affairs, 2017)
- ii. **If the program regularly uses treatment agencies outside of the VA, clinically trained representatives from these agencies are core members of the veterans court team and regularly attend team meetings and status hearings.**
 - Recidivism may be reduced twofold when representatives from the treatment court's primary treatment agencies regularly attend staffing meetings and status review hearings. (Carey, Mackin, & Finigan, 2012)
- iii. Treatment should address major criminogenic needs. Eight major criminogenic needs have been identified that contribute to the risk for recidivism among offenders and that are dynamic or changeable via programmatic interventions.
 - Reductions in recidivism are proportional to the number of criminogenic needs addressed within offender treatment programs. (Peters, 2011)
- iv. One or two treatment agencies, including the VA, are primarily responsible for managing the delivery of treatment services for veterans treatment court participants.
 - In studies surveying veterans treatment courts, 92 percent of respondents listed the Department of Veterans Affairs as essential for their courts' success. (Holbrook & Anderson, 2011)
 - Drug courts that worked with two or fewer treatment agencies were able to reduce recidivism by 74 percent over drug courts that used more agencies. (Carey, Mackin, & Finigan, 2012)

2. Treatment Entry

a. Best Practices

- i. Veterans treatment courts link participants to treatment as soon as possible.**
 - People mandated to treatment by the criminal justice system experience similar outcomes related to substance abuse and recidivism as those seeking treatment voluntarily. Retention in treatment is often higher among those coerced into treatment. Such participants perform as well as voluntary participants across a range of in-treatment indicators of progress (e.g., self-efficacy, coping skills, clinical symptoms, 12-step involvement). (Peters, 2011)
 - Participants who enter drug court quickly tend to enter treatment more quickly. (Worcel, Furrer, Green, & Rhodes, 2006)
- ii. Veterans treatment courts consider using the Risk Needs Responsivity (RNR) Model.**
 - The RNR model has led to better risk assessment instruments to predict criminal behavior and better treatment programs that match services to the level of risk and needs. As a result, the RNR model, when properly applied, has led to a reduction in recidivism. (Bonta & Andrews, 2007)

3. Treatment Services

a. Standards

- i. A veterans treatment court shall provide an individual admitted to the court with all of the following:**
 - Substance abuse treatment service, relapse prevention services, education, and vocational opportunities as appropriate and practicable. It is the intent of the legislature that, where practicable, these services shall be provided by the VA. (MCL 600.1207(1)(f))
 - Mental health treatment services as appropriate and practicable. It is the intent of the legislature that, where practicable, these services shall be provided by the VA. (MCL 600.1207(1)(g))
- ii. A veterans court shall comply with the modified version of the 10 key components of drug treatment courts as promulgated by the Buffalo veterans treatment court, which include all of the following essential characteristics:**
 - Integration of alcohol, drug treatment, and mental health services with justice system case processing. (MCL 600.1201(1)(a))
 - Provision of access to a continuum of alcohol, drug, mental health, and related treatment and rehabilitation services. (MCL 600.1201(1)(d))

b. Best Practices

- i. The veterans treatment court offers a full spectrum of mental health treatment and PTSD services.**
 - The first studies to evaluate the efficacy of veterans treatment courts have found that involvement in veterans treatment court produces sustainable improvements in recovery and PTSD for participants. (Knudsen & Wingenfeld, 2015)
- ii. The veterans court offers trauma-informed services.**
 - In a study of the efficacy of veterans treatment courts, veterans improved in all study measures – including improvement in PTSD symptom severity and depression symptoms, and a decrease in self-harm – when they were provided with a combination of trauma-specific treatment, peer-mentor services, and medication. (Knudsen & Wingenfeld, 2015)
- iii. The veterans treatment court offers a continuum of care for substance abuse treatment, including detoxification, residential, sober living, day treatment, intensive outpatient, and outpatient services.**
 - Outcomes, including graduation rates and recidivism, are significantly better in drug courts that offer a continuum of care for substance abuse treatment, which includes residential treatment and recovery housing in addition to outpatient treatment. (Carey, Mackin, & Finigan, 2012) (Koob, Brocato, & Kleinpeter, 2011)
 - Community aftercare treatment for offenders can significantly reduce rates of substance use and recidivism. (Peters, 2011)
 - The same study found trauma-specific treatment to be important for veterans with combat exposure. (Knudsen & Wingenfeld, 2015)
- iv. Participants are not incarcerated to achieve clinical or social service objectives such as obtaining access to detoxification services or sober living quarters.**
 - Relying on in-custody substance abuse treatment can reduce the cost-effectiveness of a drug court by as much as 45 percent. (Carey, Mackin, & Finigan, 2012)
 - Some drug courts may place participants in jail as a means of providing detoxification services or to keep them “off the streets” when adequate treatment is unavailable in the community. This practice is inconsistent with best practices, unduly costly, and unlikely to produce lasting benefits. (National Association of Drug Court Professionals, 2013)

4. Evidence-Based Models of Treatment

a. Best Practices

- i. **Treatment providers use evidence-based models and administer treatments that are documented in manuals and have been demonstrated to improve outcomes for persons involved in the criminal justice system.**
 - Outcomes from correctional rehabilitation are significantly better when evidence-based models are used, and fidelity to the model is maintained through continuous supervision of the treatment providers. (National Association of Drug Court Professionals, 2013)
 - Examples of manualized cognitive behavioral therapy (CBT) curricula that have been proven to reduce criminal recidivism among offenders include Moral Reconation Therapy (MRT), Reasoning and Rehabilitation (R&R), Thinking for a Change (T4C), Relapse Prevention Therapy (RPT), and the Matrix Model. (National Association of Drug Court Professionals, 2013)

5. Treatment Duration

a. Best Practices

- i. **Participants receive a sufficient dosage and duration of substance abuse and/or mental health treatment to achieve long-term sobriety and recovery from addiction and mental illness.²⁵**
 - Providing continuous treatment for at least one year is associated with reduced recidivism. (Warren, 2007)
 - The longer participants remain in treatment and the more sessions they attend, the better their outcomes. (National Association of Drug Court Professionals, 2013)

²⁵ The VA provides clinical practice guidelines for substance abuse and several mental health issues. These guidelines, available at <http://www.healthquality.va.gov/HEALTHQUALITY/guidelines/MH/index.asp>, inform courts about treatment duration.

6. Medication-Assisted Treatment (MAT)

a. Best Practices

- i. **Veterans treatment courts allow the use of medication-assisted treatment (MAT) when appropriate, based on a case-specific determination and handle MAT very similarly to other kinds of treatment.**²⁶
 - Numerous controlled studies have reported significantly better outcomes when addicted offenders received medication-assisted treatments including opioid antagonist medications such as naltrexone, opioid agonist medications such as methadone, and partial agonist medications such as buprenorphine. (Chandler, Fletcher, & Volkow, 2009) (Finigan, Perkins, Zold-Kilbourn, Parks, & Stringer, 2011)
 - Buprenorphine or methadone maintenance administered prior to and immediately after release from jail or prison has been shown to significantly increase opiate-addicted inmates' engagement in treatment, reduce illicit opiate use, reduce rearrests, and reduce mortality and hepatitis C infections. (National Association of Drug Court Professionals, 2013)
- ii. **Only physicians with expertise in addiction psychiatry and addiction medicine may determine the type, dosage, and duration of medication-assisted treatments.**
 - The basic purpose of probation is to provide an individualized program of rehabilitation. (Roberts v United States, 1943)

*b. Promising Practices*²⁷

- i. Courts monitor medication use to minimize misuse and diversion.
- ii. Medically-assisted treatment programs integrate behavior health treatment and wraparound services from a licensed treatment provider.
- iii. Courts consider all clinically appropriate forms of treatment.
- iv. Judges rely heavily on the clinical judgment of treatment providers as well as the court's own clinical staff.
- v. Courts develop strong relationships with treatment programs and require regular communication regarding participant progress.
- vi. Courts are selective about treatment programs and private prescribing physicians.

²⁶ See the VA guidelines, *supra*, for information on the use of medication-assisted treatment for substance abuse and alcohol dependence.

²⁷ These practices are suggested by, and courts should review, *Medication Assisted Treatment in Drug Courts: Recommended Strategies*, <http://lac.org/wp-content/uploads/2016/04/MATinDrugCourts.pdf>, provided by the Center for Court Innovation, the State of New York Unified Court System, and the Legal Action Center.

Works Cited

- Bruns, E., Pullmann, M., Wiggins, E., & Watterson, K. (2011). *King County Family Treatment Court Outcome Evaluation: Final Report*. Seattle, WA: Division of Public Behavioral Health and Justice Policy.
- Carey, S. M., Mackin, J. R., & Finigan, M. W. (2012). What works? The ten key components of drug court: research-based best practices. *Drug Court Review Volume VIII, Issue 1*.
- Carey, S., Mackin, J., & Finigan, M. (2012). What works? The ten key components of drug court: Research-based best practices. *Drug Court Review*, 7(1), 6-42.
- Cobbina, J., & Huebner, B. (2007). The effect of drug use, drug treatment participation, and treatment completion on probationer recidivism. *Journal of Drug Issues*, 619-641.
- Holbrook, J.G., & Anderson, S. (2011). Veterans courts: early outcomes and key indicators for success. *Widener Law School Legal Studies Research Paper No. 11-25*.
- Knudsen, K.J., & Wingenfeld, S. (2015). A specialized treatment court for veterans with trauma exposure: implications for the field. *Community Mental Health Journal*, 127-135.
- Koob, J., Brocato, J., & Kleinpeter, C. (2011). Enhancing residential treatment for drug court participants. *Journal of Offender Rehabilitation*, 252-271.
- National Association of Drug Court Professionals. (2013). *Adult Drug Court Best Practice Standards. Volume 1*.
- National Association of Drug Court Professionals. (2015). *Adult Drug Court Best Practice Standards. Volume II*.
- Peters, R. (2011, November). *Drug court treatment services: Applying research findings to practice*. Retrieved September 8, 2016, from research2practice.org: <http://research2practice.org/projects/treatment/pdfs/Issues%20Commentary%20and%20Resource%20Brief.pdf>
- United States Department of Veterans Affairs (2017). *PTSD: National Center for PTSD*. Retrieved February 27, 2017, from ptsd.va.gov: <http://www.ptsd.va.gov/professional/provider-type/community/veterans-PTSD-Justice-System.asp>
- Warren, R. K. (2007). *Evidence-based practice to reduce recidivism: Implications for state judiciaries*. Williamsburg: Crime and Justice Institute and National Institute of Corrections and National Center for State Courts.
- Worcel, S., Furrer, C., Green, B., & Rhodes, B. (2006). *Family treatment drug court evaluation: Final Phase I study report*. Portland, OR: NPC Research.

Chapter 9: Education

Education and training are important components in any veterans treatment court. This chapter discusses standards, best practices, and promising practices regarding education and training of the veterans treatment court team.

In order for a program to become a certified veterans treatment court, it must comply with all of the standards and required best practices in this chapter. All standards and required best practices are in bold.

1. General

a. Standards

- i. **A veterans court shall comply with the modified version of the 10 key components of drug treatment courts as promulgated by the Buffalo veterans treatment court, which include all of the following essential characteristics:**
 - **Continuing interdisciplinary education promotes effective veterans treatment court planning, implementation, and operations. (MCL 600.1201(1)(i))**
- ii. **A court that is adopting a veterans treatment court shall participate in training as required by the state court administrative office. (MCL 600.1201(3))**

b. Best Practices

- i. **Team members participate in continuing education workshops to gain up-to-date knowledge about best practices on veterans treatment court topics.**
 - A multisite study involving more than 60 drug courts found that participation in annual training conferences was the single greatest predictor of program effectiveness. (Shaffer, 2006) (Shaffer, 2010)
- ii. **New team members complete a formal training or orientation as soon as practical after assuming their position.**
 - Drug courts where new hires complete a formal training or orientation program were able to reduce recidivism by 54 percent over those who did not engage in such practices. (Carey, Mackin, & Finigan, 2012)
- iii. **The veterans treatment court judge attends current training events on legal and constitutional issues in treatment courts, judicial ethics, evidence-based substance abuse and mental health treatment, behavior modification, and community supervision. Attendance at annual training conferences and workshops ensure contemporary knowledge about advances in the treatment court field.**
 - Because judges have such a substantial impact on outcomes in treatment courts, continued training is especially important. (Carey, Mackin, & Finigan, 2012)

c. Promising Practices

- i. Veterans treatment court team members should attend the annual Michigan Association of Treatment Court Professionals conference.
- ii. Veterans treatment court team members should attend appropriate trainings offered by the State Court Administrative Office.

Works Cited

- Carey, S., Mackin, J., & Finigan, M. (2012). What works? The ten key components of drug court: Research-based best practices. *Drug Court Review*, 7(1), 6-42.
- Carey, S., Pukstas, K., Waller, M., Mackin, R., & Finigan, M. (2008). *Drug courts and state mandated drug treatment programs: Outcomes, costs, and consequences*. Portland, OR: NPC Research.
- National Association of Drug Court Professionals. (2013). Adult Drug Court Best Practice Standards. *Volume 1*.
- National Association of Drug Court Professionals. (2015). Adult Drug Court Best Practice Standards. *Volume II*.
- Shaffer, D. (2006). *Reconsidering drug court effectiveness: A meta-analytic review*. Cincinnati: University of Cincinnati.
- Shaffer, D. (2010). Looking inside the black box of drug courts: A meta-analytic review. *Justice Quarterly*, 493-521.

Chapter 10: Program Evaluation

This chapter addresses program evaluation of a veterans treatment court. Specific topics include collection and maintenance of information, evaluation, and program modification.

In order for a program to become a certified veterans treatment court, it must comply with all of the standards and required best practices in this chapter. All standards and required best practices are in bold.

1. Collection and Maintenance of Information

a. Standards

- i. **Each veterans treatment court shall collect and provide data on each individual applicant and participant and the entire program as required by the state court administrative office.²⁸ (MCL 600.1210)**

b. Best Practices

- i. Maintain program data for evaluation purposes in an electronic database rather than paper files.
 - Drug courts are 65 percent more cost effective when they enter data for evaluations into an electronic database rather than storing it in paper files. (Carey, Mackin, & Finigan, 2012).
 - Michigan's Drug Court Case Management Information System can be accessed at <https://dccmis.micourt.org/default.aspx>.

2. Evaluation and Program Modification

a. Best Practices

- i. **Use data to monitor program operations on a consistent basis and make program changes where necessary.**
 - In drug courts where staff monitored the internal operations of their program on a consistent basis and made necessary program modifications, the programs reduced recidivism 105 percent and were 131 percent more cost-effective than programs that did not. (Carey, Mackin, & Finigan, 2012).
- ii. Enlist the services of independent evaluators and implement appropriate recommended changes.
 - Programs that had external independent evaluators review their program and suggest changes, and then implemented those changes,

²⁸ See Appendix O. The minimum standard data set for Michigan veterans health courts is also available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/MinimumStandardDataVeterans.pdf>.

were 100 percent more effective at reducing cost and 85 percent more effective in reducing recidivism than programs that did not. (Carey, Mackin, & Finigan, 2012).

b. Promising Practices

- i. Evaluate short-term outcomes frequently while participants are enrolled in the program.
 - The National Research Advisory Committee developed a [list of performance measures](#) that drug courts should use to measure their efficiency, efficacy, and achievement of program goals. (National Association of Drug Court Professionals, 2015). Veterans treatment courts can use a similar methodology.
- ii. Independent evaluators should examine the program's three- to five-year performance outcomes at least once every five years.
 - External evaluators should examine recidivism three years to five years after participants' program admission. Program admission should be the latest start date for the evaluation because that is when the drug court becomes capable of influencing participant behavior. (National Association of Drug Court Professionals, 2015).
 - While no specific research exists with regard to how frequently a program should be evaluated, a new evaluation is warranted when a program significantly changes its operations or has staff turnover. (National Association of Drug Court Professionals, 2015).

Works Cited

- Carey, S. M., Mackin, J. R., & Finigan, M. W. (2012). What works? The ten key components of drug court: research-based best practices. *Drug Court Review Volume VIII, Issue 1*.
- Carey, S., Mackin, J., & Finigan, M. (2012). What works? The ten key components of drug court: Research-based best practices. *Drug Court Review*, 7(1), 6-42.
- National Association of Drug Court Professionals. (2015). *Adult Drug Court Best Practice Standards; Volume II*. Alexandria, Virginia: National Association of Drug Court Professionals.

Chapter 11: Veteran Peer Mentors

This chapter discusses the standards, best practices, and promising practices regarding veteran mentors as part of the veterans treatment court. Specific topics include the role of mentors and mentor coordinators, recruitment, and training.

In order for a program to become a certified veterans treatment court, it must comply with all of the standards and required best practices in this chapter. All standards and required best practices are in bold.

1. General and the Role of Mentors

a. Standards

- i. **A veterans treatment court shall provide an individual admitted to the court with all of the following:**
 - **A mentorship relationship with another veteran who can offer the participant support, guidance, and advice. It is the intent of the legislature that, where practicable, the assigned mentor should be as similar to the individual as possible in terms of age, gender, branch of service, military rank, and period of military service. (MCL 600.1207(1)(b))**

b. Best Practices

- i. **Mentors play an active role in helping veterans both in the courtroom and in the community.**
 - In a study of the Buffalo Veterans Treatment Court, 100 percent of participants reported that the mentors helped them stay focused and be successful in the program. (Washousky, et. al., 2012)
- ii. The veterans treatment court maintains a broad and diverse corps of volunteer mentors.
 - The presence of a diverse and qualified veterans mentor program was identified as a key factor in the success of the Buffalo Veterans Treatment Court. (Washousky, et. al., 2012)

c. Promising Practices

- i. The veterans treatment court retains a mentor coordinator who is responsible for recruitment, training, and some oversight of mentors.
 - The mentor coordinator manages interaction between the mentors and the veterans treatment court team, and also schedules mentors to be present during court hearings.
- ii. Veteran mentors attend court sessions when scheduled.
 - Having a mentor attend a court session with the veteran participant provides support for the participant, especially when he or she may be feeling isolated.

- iii. The court develops an assignment policy. Each participant is assigned a mentor and meets with that same mentor throughout the program, unless a concern arises that requires a change in mentors.
 - Building a consistent relationship allows the participant to trust the mentor. Experience has shown that veterans responded more favorably to other veterans in treatment court settings, increasing comfort with the court process. (Russell, 2009)
- iv. The court develops a confidentiality policy for mentors.
 - Confidentiality is essential in a mentoring relationship. Veteran participants will be more comfortable with a mentor when they know their discussions are confidential. (Buffalo, 2009)

2. Recruitment and Screening

a. Promising Practices

- i. The veterans treatment court adopts a recruitment and screening policy for new mentors.
 - It is important to recruit and retain respectable veterans to serve as mentors. A screening policy may include a requirement that mentors are in good current standing with the law, willing to commit to the program for a minimum length of time, and willing participate in training before beginning to work with a participant.
- ii. The veterans treatment court gives careful consideration to whether law enforcement officers or other government employees can serve as mentors.
 - Law enforcement officers and other government employees, such as court staff, have certain duties with regard to reporting violations of the law. If a police officer who is serving as a mentor becomes aware of a participant's illegal drug use or other program violation, that officer is put in a difficult situation between his or her job duties and role as a mentor. The court should carefully consider this balance when establishing a mentor recruitment policy.
- iii. The veterans treatment court partners with local Veterans service organizations to recruit mentors.
 - Organizations such as the Veterans of Foreign Wars (VFW), Vietnam Veterans of America (VVA), and AMVETS can provide access to veterans who are active in their communities and willing to volunteer.
- iv. The veterans court accepts qualified program graduates as mentors.
 - Many courts have reported positive results when using program graduates as mentors. Most courts require a graduate to wait a minimum amount of time, usually six months, before beginning to volunteer as a mentor.

3. Education and Training

a. Promising Practices

- i. All prospective mentors complete required initial training.
 - Training is crucial for new mentors. Training can include observing court sessions, learning the fundamentals of the court system and criminal justice case processing, basic information on substance abuse and mental health, and staying current on veterans' issues and resources in the community.
- ii. Initial training includes a confidentiality workshop.
 - The court should provide confidentiality training to all mentors, in accordance with the confidentiality policy. Mentors will be more comfortable knowing what they can share and what they must share with the court.
- iii. The veterans treatment court provides regular training for all mentors.
 - Courts should offer training for all mentors, including experienced ones, on a regular basis. Many courts offer short topical training sessions once monthly or twice yearly to help mentors keep abreast of VA operations, substance abuse or mental health, or life skills.

Works Cited

Buffalo Veteran's Treatment Court (2009). Buffalo veteran's court and veterans mentor handbook.

Russell, R.T. (2009). Veterans treatment court: a proactive approach. *Criminal and Civil Confinement*. Volume 35, 357-372.

Washousky, R., Washousky, D., Greenwood, S., and Taylor, T. (2012). Buffalo Veterans Treatment Court: Enhancement, Expansion, and Evaluation. Recovery Solutions through United States Department of Justice, Office of Justice Programs.

Appendix A

Michigan Veterans Treatment Court Statute

600.1200 Definitions.

As used in this chapter:

- (a) "Department of Veterans Affairs" or "VA" means the United States Department of Veterans Affairs.
- (b) "Domestic violence offense" means any crime alleged to have been committed by an individual against his or her spouse or former spouse, an individual with whom he or she has a child in common, an individual with whom he or she has had a dating relationship, or an individual who resides or has resided in the same household.
- (c) "L.E.I.N." means the law enforcement information network regulated under the C.J.I.S. policy council act, 1974 PA 163, MCL 28.211 to 28.215.
- (d) "Mental illness" means a substantial disorder of thought or mood that significantly impairs judgment, behavior, capacity to recognize reality, or ability to cope with the ordinary demands of life, including, but not limited to, post-traumatic stress disorder and psychiatric symptoms associated with traumatic brain injury.
- (e) "Participant" means an individual who is admitted into a veterans treatment court.
- (f) "Prosecutor" means the prosecuting attorney of the county, the city attorney, the village attorney, or the township attorney.
- (g) "Traffic offense" means a violation of the Michigan vehicle code, 1949 PA 300, MCL 257.1 to 257.923, or a violation of a local ordinance substantially corresponding to a violation of that act, that involves the operation of a vehicle and, at the time of the violation, is a felony or misdemeanor.
- (h) "Veteran" means an individual who meets both of the following:
 - (i) Is a veteran as defined in section 1 of 1965 PA 190, MCL 35.61.
 - (ii) Served at least 180 days of active duty in the armed forces of the United States.
- (i) "Veteran service organization" or "VSO" means an organization that is accredited by the United States Department of Veterans Affairs, as recognized under 38 CFR 14.628.
- (j) "Veterans treatment court" or "veterans court" means a court adopted or instituted under section 1201 that provides a supervised treatment program for individuals who are veterans and who abuse or are dependent upon any controlled substance or alcohol or suffer from a mental illness.
- (k) "Violent offender" means an individual who is currently charged with or has pled guilty to an offense involving the death of, or a serious bodily injury to, any individual, whether or not any of these circumstances are an element of the offense, or an offense that is criminal sexual conduct in any degree.

600.1201 Veterans court; compliance; characteristics; adoption or institution of veterans treatment court; memorandum of understanding; training; participants from other jurisdiction; validity of transfer; certification by state court administrative office.

(1) A veterans court shall comply with the modified version of the 10 key components of drug treatment courts as promulgated by the Buffalo veterans treatment court, which include all of the following essential characteristics:

- (a) Integration of alcohol, drug treatment, and mental health services with justice system case processing.

- (b) Use of a nonadversarial approach; prosecution and defense counsel promote public safety while protecting participants' due process rights.
 - (c) Early and prompt identification and placement of eligible participants in the veterans treatment court program.
 - (d) Provision of access to a continuum of alcohol, drug, mental health, and related treatment and rehabilitation services.
 - (e) Monitoring of abstinence by frequent alcohol and other drug testing.
 - (f) A coordinated strategy that governs veterans treatment court responses to participants' compliance.
 - (g) Ongoing judicial interaction with each veteran is essential.
 - (h) Monitoring and evaluation to measure the achievement of program goals and gauge effectiveness.
 - (i) Continuing interdisciplinary education promotes effective veterans treatment court planning, implementation, and operations.
 - (j) Forging of partnerships among veterans treatment court, veterans administration, public agencies, and community-based organizations generates local support and enhances veteran treatment court effectiveness.
- (2) The circuit court in any judicial circuit or the district court in any judicial district may adopt or institute a veterans treatment court by statute or court rule if the circuit or district court enters into a memorandum of understanding with each participating prosecuting attorney in the circuit or district court district, a representative of the criminal defense bar, a representative or representatives of community treatment providers, a representative or representatives of veterans service organizations in the circuit or district court district, and a representative or representatives of the United States Department of Veterans Affairs. However, the memorandum of understanding will only be required to include the prosecuting attorney if the veterans treatment court will include in its program individuals who may be eligible for discharge and dismissal of an offense, a delayed sentence, deferred entry of judgment, or a sentence involving deviation from the sentencing guidelines. The memorandum of understanding also may include other parties considered necessary, such as any other prosecutor in the circuit or district court district, local law enforcement, the probation departments in that circuit or district, the local substance abuse coordinating agency for that circuit or district, a domestic violence service provider program that receives funding from the state domestic violence prevention and treatment board, a representative or representatives of the local court funding unit, and community corrections agencies in that circuit or district. The memorandum of understanding shall describe the role of each party, and the conditions for which the memorandum of understanding must be renewed and amended.
- (3) A court that is adopting a veterans treatment court shall participate in training as required by the state court administrative office.
- (4) A court that has adopted a veterans treatment court under this section may accept participants from any other jurisdiction in this state based upon either the residence of the participant in the receiving jurisdiction or the unavailability of a veterans treatment court in the jurisdiction where the participant is charged. The transfer can occur at any time during the proceedings, including, but not limited to, prior to adjudication. The receiving court shall have jurisdiction to impose sentence, including, but not limited to, sanctions, incentives, incarceration, and phase changes. A transfer under this subsection is not valid unless it is agreed to by all of the following:
- (a) The defendant or respondent.
 - (b) The attorney representing the defendant or respondent.
 - (c) The judge of the transferring court and the prosecutor of the case.

(d) The judge of the receiving veterans treatment court and the prosecutor of a court funding unit of the veterans treatment court.

(5) Beginning January 1, 2018, a veterans treatment court operating in this state, or a circuit court in any judicial circuit or the district court in any judicial district seeking to adopt or institute a veterans treatment court, must be certified by the state court administrative office. The state court administrative office shall establish the procedure for certification. Approval and certification under this subsection of a veterans treatment court is required to begin or to continue the operation of a veterans treatment court under this chapter. The state court administrative office shall not recognize and include a veterans treatment court that is not certified under this subsection on the statewide official list of veterans treatment courts. The state court administrative office shall include a veterans treatment court certified under this subsection on the statewide official list of veterans treatment courts. A veterans treatment court that is not certified under this subsection shall not perform any of the functions of a veterans treatment court, including, but not limited to, any of the following functions:

(a) Charging a fee under section 1206.

(b) Discharging and dismissing a case as provided in section 1209.

(c) Receiving funding under section 1211.

(d) Certifying to the secretary of state that an individual is eligible to receive a restricted license under section 1084 of this act and section 304 of the Michigan vehicle code, 1949 PA 300, MCL 257.304.

600.1202 Hiring or contracting with treatment providers.

A veterans treatment court may hire or contract with licensed or accredited treatment providers, in consultation and cooperation with the local substance abuse coordinating agency, and other appropriate persons to assist the veterans treatment court in fulfilling its requirements under this chapter, including, but not limited to, an investigation of an individual's background or circumstances, or a clinical evaluation of an individual, before the individual is admitted or permitted to participate in a veterans treatment court. It is the intent of the legislature that, services, including, but not limited to, clinical evaluations, drug and alcohol treatment, and mental health services, shall be provided by the VA to the extent that is practical.

600.1203 Admission to veterans treatment court.

(1) A veterans treatment court shall determine whether an individual may be admitted to the veterans treatment court. No individual has a right to be admitted into a veterans treatment court. However, an individual is not eligible for admission into a veterans treatment court if he or she is a violent offender. An individual is eligible for admission into a veterans treatment court if he or she has previously had an offense discharged or dismissed as a result of participation in a veterans treatment court, drug treatment court, or other specialty court, but he or she shall not have a subsequent offense discharged or dismissed as a result of participating in the veterans treatment court.

(2) In addition to admission to a veterans treatment court under this act, an individual who is eligible for admission under this act may also be admitted to a veterans treatment court under any of the following circumstances:

(a) The individual has been assigned the status of youthful trainee under section 11 of chapter II of the code of criminal procedure, 1927 PA 175, MCL 762.11.

(b) The individual has had criminal proceedings against him or her deferred and has been placed on probation under any of the following:

- (i) Section 7411 of the public health code, 1978 PA 368, MCL 333.7411, or a local ordinance or another law of this state, another state, or the United States that is substantially similar to that section.
 - (ii) Section 4a of chapter IX of the code of criminal procedure, 1927 PA 175, MCL 769.4a, or a local ordinance or another law of this state, another state, or the United States that is substantially similar to that section.
 - (iii) Section 350a or 430 of the Michigan penal code, 1931 PA 328, MCL 750.350a and 750.430, or a local ordinance or another law of this state, another state, or the United States that is substantially similar to those sections.
- (3) To be eligible for admission to a veterans treatment court, an individual shall cooperate with and complete a preadmissions screening and evaluation assessment and shall agree to cooperate with any future evaluation assessment as directed by the veterans treatment court. A preadmission screening and evaluation assessment shall include all of the following:
- (a) A determination of the individual's veteran status. A review of the DD Form 214 "certificate of release or discharge from active duty" satisfies the requirement of this subdivision.
 - (b) A complete review of the individual's criminal history and whether the individual has been admitted to, has participated in, or is currently participating in a veterans treatment court, drug treatment court, or other specialty court, whether admitted under this act or a law listed under subsection (2), and the results of the individual's participation. A review of the L.E.I.N. satisfies the requirements of this subdivision unless a further review is warranted. The court may accept other verifiable and reliable information from the prosecution or defense to complete its review and may require the individual to submit a statement as to whether or not he or she has previously been admitted to a veterans treatment court, drug treatment court, or other specialty court, and the results of his or her participation in the prior program or programs.
 - (c) An assessment of the risk of danger or harm to the individual, others, or the community.
 - (d) A review of the individual's history regarding the use or abuse of any controlled substance or alcohol and an assessment of whether the individual abuses controlled substances or alcohol or is drug or alcohol dependent. It is the intent of the legislature that, to the extent practicable, an assessment under this subdivision shall be a clinical assessment completed by the VA.
 - (e) A review of the individual's mental health history. It is the intent of the legislature that, to the extent practicable, this assessment shall be a clinical assessment completed by the VA.
 - (f) A review of any special needs or circumstances of the individual that may potentially affect the individual's ability to receive substance abuse treatment and follow the court's orders.
- (4) Except as otherwise permitted in this act, any statement or other information obtained as a result of an individual's participation in a preadmission screening and evaluation assessment under subsection (3) is confidential, is exempt from disclosure under the freedom of information act, 1976 PA 442, MCL 15.231 to 15.246, and shall not be used in a criminal prosecution, except for a statement or information that reveals criminal acts other than personal drug use.
- (5) The court may request that the department of state police provide to the court information contained in the L.E.I.N. pertaining to an individual applicant's criminal history for the purposes of determining an individual's admission into the veterans treatment court and general criminal history review, including whether the individual has previously been admitted to and participated

in a veterans treatment court, drug treatment court, or other specialty court under this act or under a statute listed under subsection (2), and the results of the individual's participation. The department of state police shall provide the information requested by a veterans treatment court under this subsection.

600.1204 Findings or statement.

Before an individual is admitted into a veterans treatment court, the court shall find on the record or place a statement in the court file establishing all of the following:

- (a) That the individual is a veteran.
- (b) That the individual is dependent upon or abusing drugs or alcohol, or suffers from a mental illness, and is an appropriate candidate for participation in the veterans treatment court.
- (c) That the individual understands the consequences of entering the veterans treatment court and agrees to comply with all court orders and requirements of the court's program and treatment providers.
- (d) That the individual is not an unwarranted or substantial risk to the safety of the public or any individual, based upon the screening and assessment or other information presented to the court.
- (e) That the individual is not a violent offender.
- (f) That the individual has completed a preadmission screening and evaluation assessment under section 1203(3) and has agreed to cooperate with any future evaluation assessment as directed by the veterans treatment court.
- (g) That the individual meets the requirements, if applicable, of a statute listed under section 1203(2).
- (h) The terms, conditions, and duration of the agreement between the parties, and the outcome for the participant of the veterans treatment court upon successful completion by the participant or termination of participation.

600.1205 Admission of individual charged in criminal case; conditions.

(1) If the individual being considered for admission to a veterans treatment court is charged in a criminal case, his or her admission is subject to all of the following conditions:

- (a) The offense or offenses allegedly committed by the individual are generally related to the military service of the individual, including the abuse, illegal use, or possession of a controlled substance or alcohol, or mental illness that arises as a result of service.
- (b) The individual pleads guilty to the charge or charges on the record.
- (c) The individual waives in writing the right to a speedy trial, the right to representation by an attorney at veterans treatment court review hearings, and, with the agreement of the prosecutor, the right to a preliminary examination.
- (d) The individual signs a written agreement to participate in the veterans treatment court.

(2) An individual who may be eligible for discharge and dismissal of an offense, delayed sentence, deferred entry of judgment, or deviation from the sentencing guidelines shall not be admitted to a veterans treatment court unless the prosecutor first approves the admission of the individual into the veterans treatment court in conformity with the memorandum of understanding under section 1201(2).

(3) An individual shall not be admitted to, or remain in, a veterans treatment court under an agreement that would permit the discharge or dismissal of a traffic offense upon successful completion of the veterans treatment court program.

(4) In addition to rights accorded a victim under the William Van Regenmorter crime victim's rights act, 1985 PA 87, MCL 780.751 to 780.834, the veterans treatment court shall permit any victim of the offense or offenses of which the individual is charged, any victim of a prior offense of which that individual was convicted, and members of the community in which the offenses were committed or in which the defendant resides to submit a written statement to the court regarding the advisability of admitting the individual into the veterans treatment court.

(5) An individual who has waived his or her right to a preliminary examination and has pled guilty as part of his or her application to a veterans treatment court and who is not admitted to a veterans treatment court shall be permitted to withdraw his or her plea and is entitled to a preliminary examination.

600.1206 Admission to veterans treatment court; conditions; length of jurisdiction; collaboration; fee; information contained in L.E.I.N. pertaining to criminal history.

(1) All of the following conditions apply to an individual admitted to a veterans treatment court:

(a) For an individual who is admitted to a veterans treatment court based upon having a criminal charge currently filed against him or her, the court shall accept the individual's plea of guilty.

(b) One of the following applies to an individual who pled guilty to a criminal charge for which he or she was admitted to a veterans treatment court, as applicable:

(i) If the individual pled guilty to an offense that is not a traffic offense and may be eligible for discharge and dismissal under the agreement with the court and prosecutor upon successful completion of the veterans treatment court program, the court shall not enter a judgment of guilt.

(ii) If the individual pled guilty to a traffic offense or another offense but is not eligible for discharge and dismissal under the agreement with the court and prosecutor upon successful completion of the veterans treatment court program, the court shall enter a judgment of guilt.

(c) Under the agreement with the individual and the prosecutor, the court may delay or defer further proceedings as provided in section 1 of chapter XI of the code of criminal procedure, 1927 PA 175, MCL 771.1, or proceed to sentencing, as applicable in that case under that agreement, and place the individual on probation or other court supervision in the veterans treatment court program with terms and conditions according to the agreement and as considered necessary by the court.

(2) Unless a memorandum of understanding made pursuant to section 1088 between a receiving veterans treatment court and the court of original jurisdiction provides otherwise, the original court of jurisdiction maintains jurisdiction over the veterans treatment court participant as provided in this act until final disposition of the case, but not longer than the probation period fixed under section 2 of chapter XI of the code of criminal procedure, 1927 PA 175, MCL 771.2.

(3) The veterans treatment court shall cooperate with, and act in a collaborative manner with, the prosecutor, defense counsel, treatment providers, the local substance abuse coordinating agency for that circuit or district, probation departments, the United States Department of Veterans Affairs, local VSOs in that circuit or district, and, to the extent possible, local law enforcement, the department of corrections, and community corrections agencies.

(4) The veterans treatment court may require an individual admitted into the court to pay a veterans treatment court fee that is reasonably related to the cost to the court for administering the veterans treatment court program as provided in the memorandum of understanding under section 1201(2). The clerk of the veterans treatment court shall transmit the fees collected to the treasurer of the local funding unit at the end of each month.

(5) The veterans treatment court may request that the department of state police provide to the court information contained in the L.E.I.N. pertaining to an individual applicant's criminal history for purposes of determining the individual's compliance with all court orders. The department of state police shall provide the information requested by a veterans treatment court under this subsection.

600.1207 Veterans treatment court; responsibilities to individual.

(1) A veterans treatment court shall provide an individual admitted to the court with all of the following:

- (a) Consistent, continual, and close monitoring and interaction with the court, treatment providers, probation, and the participant.
- (b) A mentorship relationship with another veteran who can offer the participant support, guidance, and advice. It is the intent of the legislature that, where practicable, the assigned mentor should be as similar to the individual as possible in terms of age, gender, branch of service, military rank, and period of military service.
- (c) Mandatory periodic and random testing for the presence of any controlled substance or alcohol in a participant's blood, urine, or breath, using, to the extent practicable, the best available, accepted, and scientifically valid methods.
- (d) Periodic evaluation assessments of the participant's circumstances and progress in the program.
- (e) A regimen or strategy of appropriate and graduated but immediate rewards for compliance and sanctions for noncompliance, including, but not limited to, the possibility of incarceration or confinement.
- (f) Substance abuse treatment services, relapse prevention services, education, and vocational opportunities as appropriate and practicable. It is the intent of the legislature that, where practicable, these services shall be provided by the VA.
- (g) Mental health treatment services as appropriate and practicable. It is the intent of the legislature that, where practicable, these services shall be provided by the VA.

(2) Any statement or other information obtained as a result of participating in assessment, treatment, or testing while in a veterans treatment court is confidential and is exempt from disclosure under the freedom of information act, 1976 PA 442, MCL 15.231 to 15.246, and shall not be used in a criminal prosecution, except for a statement or information that reveals criminal acts other than, or inconsistent with, personal drug use.

600.1208 Duties of individual; notification of new crime; payment of fines, fees, and costs.

(1) In order to continue to participate in and successfully complete a veterans treatment court program, an individual shall do all of the following:

- (a) Pay all court-ordered fines and costs, including minimum state costs.
- (b) Pay the veterans treatment court fee allowed under section 1206(4).
- (c) Pay all court-ordered restitution.
- (d) Pay all crime victims' rights assessments under section 5 of 1989 PA 196, MCL 780.905.
- (e) Comply with all court orders. Violations of a court order may be sanctioned within the court's discretion.
- (f) Meet with a member of a veteran service organization or a county veteran counselor to discuss available veterans benefit programs for which the individual may qualify.

(2) The veterans treatment court shall be notified if the veterans treatment court participant is accused of a new crime, and the judge shall consider whether to terminate the participant's

participation in the veterans treatment court program in conformity with the memorandum of understanding under section 1201(2). If the participant is convicted of a felony for an offense that occurred after the defendant is admitted to the veterans treatment court, the judge shall terminate the participant's participation in the veterans treatment court.

(3) The court shall require that a participant pay all fines, costs, the fee, restitution, and assessments described in subsection (1)(a) to (d) and pay all, or make substantial contributions toward payment of, the costs of the treatment and the veterans treatment court program services provided to the participant, including, but not limited to, the costs of urinalysis and such testing or any counseling provided. However, if the court determines that the payment of fines, the fee, or costs of treatment under this subsection would be a substantial hardship for the individual or would interfere with the individual's substance abuse or mental health treatment, the court may waive all or part of those fines, the fee, or costs of treatment.

600.1209 Veterans treatment court program; finding or statement upon completion or termination of program; discharge or dismissal of proceedings; duties of court upon successful completion of probation or court supervision; termination or failure to successfully complete program; duties of court.

(1) Upon completion or termination of the veterans treatment court program, the court shall find on the record or place a written statement in the court file as to whether the participant completed the program successfully or whether the individual's participation in the program was terminated and, if it was terminated, the reason for the termination.

(2) If a participant successfully completes probation or other court supervision and the participant's proceedings were deferred or the participant was sentenced under section 1206, the court shall comply with the agreement made with the participant upon admission into the veterans treatment court, or the agreement as it was altered after admission by the court with approval of the participant and the prosecutor for that jurisdiction as provided in subsections (3) to (8).

(3) If an individual is participating in a veterans treatment court under a statute listed in section 1203(2), the court shall proceed under the applicable section of law. There shall be not more than 1 discharge or dismissal under this subsection.

(4) Except as provided in subsection (5), the court, with the agreement of the prosecutor and in conformity with the terms and conditions of the memorandum of understanding under section 1201(2), may discharge and dismiss the proceedings against an individual who meets all of the following criteria:

- (a) The individual has participated in a veterans treatment court for the first time.
- (b) The individual has successfully completed the terms and conditions of the veterans treatment court program.
- (c) The individual is not required by law to be sentenced to a correctional facility for the crimes to which he or she has pled guilty.
- (d) The individual is not currently charged with and has not pled guilty to a traffic offense.
- (e) The individual has not previously been subject to more than 1 of any of the following:
 - (i) Assignment to the status of youthful trainee under section 11 of chapter II of the code of criminal procedure, 1927 PA 175, MCL 762.11.
 - (ii) The dismissal of criminal proceedings against him or her under section 7411 of the public health code, 1978 PA 368, MCL 333.7411, section 4a of chapter IX of the code of criminal procedure, 1927 PA 175, MCL 769.4a, or section 350a or 430 of the Michigan penal code, 1931 PA 328, MCL 750.350a and 750.430.

(5) The court may grant a discharge and dismissal of a domestic violence offense only if all of the following circumstances apply:

(a) The individual has not previously had proceedings dismissed under section 4a of chapter IX of the code of criminal procedure, 1927 PA 175, MCL 769.4a.

(b) The domestic violence offense is eligible to be dismissed under section 4a of chapter IX of the code of criminal procedure, 1927 PA 175, MCL 769.4a.

(c) The individual fulfills the terms and conditions imposed under section 4a of chapter IX of the code of criminal procedure, 1927 PA 175, MCL 769.4a, and the discharge and dismissal of proceedings are processed and reported under section 4a of chapter IX of the code of criminal procedure, 1927 PA 175, MCL 769.4a.

(6) A discharge and dismissal under subsection (4) shall be without adjudication of guilt and is not a conviction for purposes of this section or for purposes of disqualifications or disabilities imposed by law upon conviction of a crime. There shall be not more than 1 discharge and dismissal under subsection (4) for an individual. The court shall send a record of the discharge and dismissal to the criminal justice information center of the department of state police, and the department of state police shall enter that information into the L.E.I.N. with an indication of participation by the individual in a veterans treatment court. Unless the court enters a judgment of guilt, all records of the proceedings regarding the participation of the individual in the veterans treatment court under subsection (4) are closed to public inspection and are exempt from public disclosure under the freedom of information act, 1976 PA 442, MCL 15.231 to 15.246, but shall be open to the courts of this state, another state, or the United States, the department of corrections, law enforcement personnel, and prosecutors only for use in the performance of their duties or to determine whether an employee of the court, department, law enforcement agency, or prosecutor's office has violated his or her conditions of employment or whether an applicant meets criteria for employment with the court, department, law enforcement agency, or prosecutor's office. The records and identifications division of the department of state police shall retain a nonpublic record of an arrest and the discharge and dismissal under this subsection.

(7) Except as provided in subsection (3), (4), or (5), if an individual has successfully completed probation or other court supervision, the court shall do the following:

(a) If the court has not already entered an adjudication of guilt or responsibility, enter an adjudication of guilt.

(b) If the court has not already sentenced the individual, proceed to sentencing.

(c) Send a record of the conviction and sentence or the finding or adjudication of responsibility and disposition to the criminal justice information center of the department of state police. The department of state police shall enter that information into the L.E.I.N. with an indication of successful participation by the individual in a veterans treatment court.

(8) For a participant whose participation is terminated or who fails to successfully complete the veterans treatment court program, the court shall enter an adjudication of guilt if the entering of guilt was deferred or sentencing was delayed under section 1206 and shall then proceed to sentencing or disposition of the individual for the original charges to which the individual pled guilty prior to admission to the veterans treatment court. Upon sentencing or disposition of the individual, the court shall send a record of that sentence or disposition and the individual's unsuccessful participation in the veterans treatment court to the criminal justice information center of the department of state police, and the department of state police shall enter that information into the L.E.I.N., with an indication that the individual unsuccessfully participated in a veterans treatment court.

600.1210 Collection of data.

Each veterans treatment court shall collect and provide data on each individual applicant and participant and the entire program as required by the state court administrative office.

600.1211 Funds; report.

(1) Where practicable, the supreme court has authority to expend state funds for the establishment and operation of veterans treatment courts. Federal funds provided to the state for the operation of veterans treatment courts shall be distributed by the department of community health or the appropriate state agency as otherwise provided by law. Nothing in this subsection prevents a local unit of government or circuit or district court from expending funds for the establishment and operation of veterans treatment courts.

(2) The state treasurer may receive money or other assets from any source for deposit into the appropriate state fund or funds for the purposes described in subsection (1).

(3) Each veterans treatment court shall report quarterly to the state court administrative office on the funds received and expended by that veterans treatment court in a manner prescribed by the state court administrative office.

600.1212 State drug treatment court advisory committee; monitoring; recommendations.

The state drug treatment court advisory committee created under section 1082 shall monitor the effectiveness of veterans treatment courts and the availability of funding and present annual recommendations to the legislature and supreme court regarding statutory changes regarding veterans treatment courts.

Appendix B

Model Veterans Treatment Court Discharge Statement

STATE OF MICHIGAN [court number and type]	VTC Program Discharge ²⁹	CASE NO. [case/file number]
In the matter of:	[defendant name and DOB] [defendant address]	
<p>On this [number] day of [month], [year] the defendant:</p> <p>— Successfully completed the VTC program</p> <p>— Voluntarily withdrew from the program</p> <p>— Was discharged from the program as unsuccessful due to:</p> <p>— Violation of the program</p> <p>— Conviction of new criminal charges</p> <p>— Being a risk to public safety</p> <p>— Other: [specify]</p>		
<p>_____ P _____</p> <p>Honorable [name of VTC judge]</p>		<p>_____</p> <p>Date</p>

²⁹ This model document is provided by SCAO as a resource and for informational purposes only to facilitate the operation of problem solving courts by local units of government and courts in compliance with statutory requirements. SCAO's sharing this model document is not intended (and cannot be construed) as legal advice.

Since there might be a delay in updating the model document on the web page and updating the model document in this manual, the most up-to-date version of the model document is always available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VTC-DischargeStatment.pdf>

Appendix C

Model Multi-Party Consent for Release of Information

[Name of problem solving court] Multiple-Party Consent for Release of Information³⁰

Participant's Full Name: _____ DOB: _____

I authorize the following parties:

1. [Name of problem solving court]
2. [Name of county] MDOC
3. [Name of district court] probation department
4. [Name of county] prosecutor's office
5. [Name of treatment agency]
6. [Name of law enforcement agency]
7. [Name of law firm/office, or name of defense attorney on team]
8. [Name of drug and alcohol testing agency]
9. [Name of electronic monitoring agency]
10. [Name of county] Office of Community Corrections

If information is authorized to be released to a party under a general designation, the participant (or other individual authorized to sign in lieu of the participant), understands that, upon request and consistent with this part, the [name of problem solving court] program will provide a list of entities to which their information has been disclosed pursuant to the general designation (see § 2.13(d)).

To communicate with and disclose to one another the following information:

INFORMATION TO BE SHARED

1. Name, address, and other personal identifying information of the participant.
2. [Name of problem solving court] program assessments (GAIN, COMPAS, risk and needs, etc.).
3. [Name of problem solving court] program behavior summaries and updates.
4. Treatment information, including assessments, attendance, progress and compliance reports, treatment plans and discharge summaries.

³⁰ This model document is provided by SCAO as a resource to assist problem-solving courts in complying with a standard for certification. It is not intended to be legal advice or to include all federal confidentiality requirements.

Since there might be a delay in updating the model document on the web page and updating the model document in this manual, the most up-to-date version of the model document is always available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/ReleaseInfoMultiParty.pdf>

5. Drug and alcohol screening, testing, confirmation results, and payment information.
6. Health information.
7. Reportable communicable disease information, including HIV, sexually transmitted infections, hepatitis, and tuberculosis.
8. Health plan or health benefits information.
9. Electronic monitoring information, including compliance and payment information.
10. Other (specify, if any): _____

Note: I authorize all of the foregoing information to be shared unless I indicate here, by number, one or more categories of information not to be shared: _____

PURPOSE OF USE AND DISCLOSURE

The purposes for the disclosures authorized by this form are:

1. To assess the participant's need for substance use, mental health, or developmental disabilities services and treatment.
2. To provide, manage, and coordinate **[name of problem solving court]** program and substance use, mental health, and developmental disabilities services and treatment for the participant.
3. To develop a Person-Centered Plan, Service Plan, and/or Treatment Plan for the participant.
4. To make dispositional recommendations for a court-involved participant.
5. To monitor payment for services, and establish financial assistance if determined necessary.
6. To improve service and treatment outcomes for participants involved in the **[name of problem solving court]** program.
7. Other (please specify): _____
- 8.

REDISCLASURE AND CONFIDENTIALITY

Once health care information is disclosed pursuant to this signed authorization, I understand that the federal health privacy law (45 CFR, Parts 160 and 164) protecting health information may not apply to the recipient of the information and, therefore, may not prohibit the recipient from redisclosing information to others. However, substance-abuse treatment information protected by federal law (42 CFR, Part 2), shall remain confidential and must not be redisclosed by the recipient except as authorized by those laws or this authorization. The federal rules restrict any use of this information to criminally investigate or prosecute any alcohol or drug abuse patient.

CONSENT EXPIRATION

The date, event, or condition upon which consent expires must ensure that the consent will last no longer than reasonably necessary to serve the purpose for which it is given.

This consent for release of information shall expire upon my successful graduation from the problem solving court program; or upon termination for violation of the [name of problem solving court] terms or upon a date certain for other specified reasons.

CONFIDENTIALITY RIGHTS

Federal law protects the confidentiality of treatment records under 42 CFR, Section 2.1 through Section 2.67; and Section 290dd-2. This means that:

1. Treatment information is ordinarily kept confidential.
2. Review hearings are held in open and public courtrooms, and although the court attempts to minimize confidential information in court, it is possible that an observer could connect a participant's identity with the fact that he or she is in treatment as a condition of participation in the **[name of problem solving court]** or that confidential information may be revealed. I specifically consent to a potential disclosure to third persons.
3. Staffing meetings, which are held before review hearings, are typically closed to the public. Confidential information may be discussed by the **[name of problem solving court]** team members at a staffing meeting. I understand that if a non-team member is invited to participate in a staffing meeting they must receive my consent prior to observation.
4. If I refuse to consent to disclosure or attempt to revoke my consent prior to the expiration of this consent such action is grounds for immediate termination from the **[name of problem solving court]**.
5. It is a crime to violate confidentiality requirements, and the participant may report such violations to Michigan's attorney general at 517-373-1110.
6. Notwithstanding this confidentiality requirement, covered information may be released under specified circumstances **[insert list of specific circumstances]**, and may include medical emergency, crimes on the premises, crimes against staff, administration/qualified service providers working with the **[name of problem solving court]**, and outside auditors, central registries and researchers).
7. Federal law does not protect information relating to the abuse or neglect of a child, state child abuse laws, court orders signed pursuant to 42 CFR part 2 for release of specific information, state laws relating to cause of death and duty to protect others, and to warn of serious imminent harm.

I acknowledge that I have been advised of my rights, have received a copy of the advisement, and have had the benefit of legal counsel or have voluntarily waived the right to an attorney. I am not under the influence of drugs or alcohol. I fully understand my rights and I am signing this Consent voluntarily.

SIGNATURE CONSENTING TO RELEASE OF INFORMATION

Participant signature

Date

Staff witness signature

Date

Staff witness printed name

**SIGNATURE CONFIRMING PARTICIPANT WAS ADVISED OF CONFIDENTIALITY
RIGHTS BOTH VERBALLY AND IN WRITING**

Participant signature

Date

Staff witness signature

Date

Staff witness printed name

Parts of this form were adapted from:

Mark F Botts, L. B. (2015, April 7). <https://www.sog.unc.edu/publications/reports/north-carolina-juvenile-justice-%E2%80%93-behavioral-health-information-sharing-guide>. Retrieved April 11, 2018, from <https://www.sog.unc.edu>:
<https://www.sog.unc.edu/sites/www.sog.unc.edu/files/Information%20Sharing%20Guide%20FINAL%20PDF%20to%20authors%202015-06-25.pdf>

Appendix D

Model Notice of Prohibition Against Redisclosure

[Name of problem solving court program] Notice of Prohibition Against Redisclosure³¹

Disclosure of any participant's confidential information that is made by a team member may only be made if there is a signed consent to release information form on file and it must be accompanied by one of the following written statements:

- (1) This information has been disclosed to you from records protected by federal confidentiality rules (42 CFR, Part 2). The federal rules prohibit you from making any further disclosure of information in this record that identifies a patient as having or having had a substance use disorder either directly, by reference to publicly available information, or through verification of such identification by another person unless further disclosure is expressly permitted by the written consent of the individual whose information is being disclosed or as otherwise permitted by 42 CFR, Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose (see § 2.31). The federal rules restrict any use of the information to investigate or prosecute with regard to a crime any patient with a substance use disorder, except as provided at §§ 2.12(c)(5) and 2.65; or
- (2) 42 CFR, Part 2 prohibits unauthorized disclosure of these records.

³¹ This model document is provided by SCAO as a resource to assist problem-solving courts in complying with a standard for certification. It is not intended to be legal advice or to include all federal confidentiality requirements.

Since there might be a delay in updating the model document on the web page and updating the model document in this manual, the most up-to-date version of the model document is always available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/NoticeProhibitionAgainstRedisclosure.pdf>

Appendix E

Model Confidentiality Policies and Procedures

[Name of drug court program] Policies and Procedures Regarding Access to and Use of Written and Electronic Confidential Records³²

- I. Access and Use of Written and Electronic Confidential Records within the Drug Court Team**
- a. Except as otherwise permitted in the Michigan Drug Court Statute, any statement or other information obtained as a result of participating in a preadmission screening and evaluation assessment is confidential and is exempt from disclosure under the freedom of information act, 1976 PA 442, MCL 15.231 to 15.246, and shall not be used in a criminal prosecution, unless it reveals criminal acts other than, or inconsistent with, personal drug use.
 - b. Confidential treatment court information and records may not be used to initiate or to substantiate any criminal charges against a participant or to conduct any investigation of a participant.
 - c. Records of participants may only be released to parties listed on a signed up-to-date release of information form. Records may only be released if the requested record is listed as information that may be shared.
 - d. Any documented treatment information disclosed under a signed consent to release information, shall be accompanied by the **[name of drug court program]** Notice of Prohibition against Redisclosure.
 - e. **[Name of drug court program]** written/paper program files shall be kept in a locked filing cabinet in **[name of secure location]**, with access limited to authorized individuals.
 - f. Precourt staffing meeting reports shall be returned to the **[name of drug court]** program coordinator upon conclusion of the meeting.
 - g. All users of the DCCMIS shall sign a DCCMIS user agreement prior to being assigned a username and password.
 - h. Electronic data that is subject to confidentiality standards is protected by security walls and is password protected. Access is limited, and disclosure/redisclosure is subject to approval by the treatment court judge and team.
 - i. Upon expiration of consent for release of information written/paper program files shall be moved to **[name of secure location with restricted access]** and shall be kept in a locked filing cabinet.

³² This model document is provided by SCAO as a resource to assist problem-solving courts in complying with a standard for certification. It is not intended to be legal advice or to include all federal confidentiality requirements.

- j. Upon expiration of consent for release of information confidential records on computers are protected by changing the password or other access.

II. Access and Use of Written and Electronic Confidential Records Outside of the Drug Court Team

- a. Generally, unless access to a file is restricted by statute, court rule or an order pursuant to MCR 8.119(I), any person may inspect pleadings and other papers in a court clerk's office and may obtain copies as provided in MCR 8.119(J).
- b. Responses to all requests for access to nonpublic and limited-access records shall be made per the following resources:
 - i. Michigan Trial Court Case File Management Standards - Component 19, Providing Public Access to Records
 - ii. Chart of Nonpublic and Limited-Access Court Records
 - iii. Michigan Supreme Court Administrative Order 2006-2 - Privacy Policy and Access to Records
 - iv. SCAO Administrative Memorandum 2006-04 - Privacy Policy and Access to Records
- c. Staffing meetings may be observed by staff from other courts for the purpose of planning their own drug court program, and by SCAO staff. All observers of the meeting shall sign a confidentiality agreement prior to the start of the meeting, and all participants discussed at the meeting must sign a **[name of drug court program]** consent to release information, with the observing parties listed, prior to the staffing meeting.

Appendix F

Model DCCMIS User Confidentiality Agreement

DCCMIS User Confidentiality Agreement³³

This Confidentiality Agreement applies to **[name of drug court program]**'s employees, members of the **[name of drug court program]** team, and **[name of other drug court program DCCMIS users, such as evaluator]** hereinafter referred to as "users", who have direct access to the Drug Court Case Management Information System (DCCMIS).

User understands and agrees:

- All network passwords are confidential and shall not be disclosed to any third party including other authorized users of the DCCMIS.
- The **[name of problem solving court program]** DCCMIS administrator shall provide user with the network password necessary to gain access to the DCCMIS network.
- In the event that user reasonably suspects or becomes aware of any unauthorized use or disclosure of user's network password or other confidential user identification, user shall immediately change the password, and shall immediately report the unauthorized use or disclosure to **[name of problem solving court program]**'s DCCMIS administrator .
- **[Name of problem solving court program]**'s DCCMIS administrator, The State Court Administrative Office (SCAO), and Advanced Computer Technologies (ACT) shall have the right to suspend or revoke user's network access without notice in the event of any breach or suspected breach of confidentiality.
- To be accountable for all entries of client information, orders and data entered by user into DCCMIS under user's password.
- To access client information and/or records only for the following purposes in accordance with applicable state and federal laws and regulations:
 - coordinating services with ancillary and other treatment service providers;
 - reviewing client's progress in program areas as needed per user's role on the team;
 - conducting statistical research, or audits;
 - conducting quality assurance, or review activities;
 - For DCCMIS administrators requirements involving verification and other operational purposes.
- To not disclose or re-disclose any client information and/or records to any other entity or individual without the prior written authorization of the participant or the participant's authorized representative.

³³ This model document is provided by SCAO as a resource and for informational purposes only to facilitate the operation of problem solving courts by local units of government and courts in compliance with statutory requirements. SCAO's sharing this model document is not intended (and cannot be construed) as legal advice.

Since there might be a delay in updating the model document on the web page and updating the model document in this manual, the most up-to-date version of the model document is always available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/DCCMIS-UserConfAgreement.pdf>

- SCAO and ACT may conduct unannounced audits of user's access to its information systems, software applications, network and data on a periodic basis to monitor appropriate use of and compliance with the obligations stated above.
- Any violation of participant confidentiality may result in termination of access to DCCMIS.
- Information may be disclosed in summary, statistical, or other form, which does not directly or indirectly identify particular drug court participants or related parties.

I understand that alcohol and/or drug treatment records and mental health records are protected under the Federal regulations governing Confidentiality and Drug Abuse Patient Records, 42 CFR, Part 2, and the Health Insurance Portability and Accountability Act of 1996 (HIPAA), 45 CFR, Parts 160 & 164, and cannot be disclosed without the written consent of the **[name of program]** participant or a person legally authorized to represent the participant unless otherwise provided for by the regulations.

Signature of DCCMIS user

Date

Printed name of DCCMIS user

Attached: Penalties under 42 CFR Part 2 and Penalties under HIPAA

Penalties Under 42CFR Part 2

§2.3 Purpose and effect.

(a) *Purpose.* Under the statutory provisions quoted in §§2.1 and 2.2, these regulations impose restrictions upon the disclosure and use of alcohol and drug abuse patient records which are maintained in connection with the performance of any federally assisted alcohol and drug abuse program. The regulations specify:

- (1) Definitions, applicability, and general restrictions in subpart B (definitions applicable to §2.34 only appear in that section);
- (2) Disclosures which may be made with written patient consent and the form of the written consent in subpart C;
- (3) Disclosures which may be made without written patient consent or an authorizing court order in subpart D; and
- (4) Disclosures and uses of patient records which may be made with an authorizing court order and the procedures and criteria for the entry and scope of those orders in subpart E.

(b) *Effect.* (1) These regulations prohibit the disclosure and use of patient records unless certain circumstances exist. If any circumstances exists under which disclosure is permitted, that circumstance acts to remove the prohibition on disclosure but it does not compel disclosure. Thus, the regulations do not require disclosure under any circumstances.

(2) These regulations are not intended to direct the manner in which substantive functions such as research, treatment, and evaluation are carried out. They are intended to insure that an alcohol or drug abuse patient in a federally assisted alcohol or drug abuse program is not made more vulnerable by reason of the availability of his or her patient record than an individual who has an alcohol or drug problem and who does not seek treatment.

(3) Because there is a criminal penalty (a fine—see 42 U.S.C. 290dd-2, and 42 CFR 2.4) for violating the regulations, they are to be construed strictly in favor of the potential violator in the same manner as a criminal statute (see *M. Kraus & Brothers v. United States*, 327 U.S. 614, 621–22, 66 S. Ct. 705, 707–08 (1946)).

§2.4 Criminal penalty for violation.

Under 42 U.S.C. [42 U.S.C. 290dd-2](#), any person who violates any provision of those statutes or these regulations shall be fined not more than \$500 in the case of a first offense, and not more than \$5,000 in the case of each subsequent offense.

§2.5 Reports of violations.

(a) The report of any violation of these regulations may be directed to the United States Attorney for the judicial district in which the violation occurs.

(b) The report of any violation of these regulations by a methadone program may be directed to the Regional Offices of the Food and Drug Administration.

Penalties Under HIPAA

42USC1320d-5 General penalty for failure to comply with requirements and standards

(a) General penalty

(1) In general

Except as provided in subsection (b), the Secretary shall impose on any person who violates a provision of this part a penalty of not more than \$100 for each such violation, except that the total amount imposed on the person for all violations of an identical requirement or prohibition during a calendar year may not exceed \$25,000.

42USC1320d-6 Wrongful disclosure of individually identifiable health information

(a) Offense

A person who knowingly and in violation of this part-

- (1) uses or causes to be used a unique health identifier;
- (2) obtains individually identifiable health information relating to an individual; or
- (3) discloses individually identifiable health information to another person,

shall be punished as provided in subsection (b).

(b) Penalties

A person described in subsection (a) shall-

- (1) be fined not more than \$50,000, imprisoned not more than 1 year, or both;
- (2) if the offense is committed under false pretenses, be fined not more than \$100,000, imprisoned not more than 5 years, or both; and
- (3) if the offense is committed with intent to sell, transfer, or use individually identifiable health information for commercial advantage, personal gain, or malicious harm, be fined not more than \$250,000, imprisoned not more than 10 years, or both.

Appendix G

Model Confidentiality MOU

[Name of problem solving court]

Memorandum of Understanding Regarding Confidentiality³⁴

I. Parties

This agreement facilitates the exchange of information between parties of the agreement in order to effectively coordinate services and provide oversight to participants involved in the criminal justice and treatment systems. It is made and entered into as of the date set forth below, by and between the following parties whose representatives have signed the agreement:

1. [Name of problem solving court]
2. [Name of county] MDOC
3. [Name of district court] probation department
4. [Name of county] prosecutor's office
5. [Name of treatment agency]
6. [Name of law enforcement agency]
7. [Name of law firm/office, or name of defense attorney on team]
8. [Name of drug and alcohol testing agency]
9. [Name of electronic monitoring agency]
10. [Name of county] Office of Community Corrections

II. Purposes

Whereas, all parties are committed to ensuring that clients involved with both the criminal justice and treatment systems are afforded appropriate levels of treatment, with the least burdensome delivery of services;

Whereas, the privacy and confidentiality of information regarding clients involved with the criminal justice and treatment systems is an important legal and ethical obligation;

Whereas, all parties are committed to improving cooperation, integration, and collaboration at the service delivery, administrative, and evaluative levels for the benefit of clients involved with both the criminal justice and treatment systems;

Whereas, all parties agree that improvements to the quality and effectiveness of services can be supported by the sharing of relevant and necessary information;

³⁴ This model document is provided by SCAO as a resource to assist problem-solving courts in complying with a standard for certification. It is not intended to be legal advice or to include all federal confidentiality requirements.

Since there might be a delay in updating the model document on the web page and updating the model document in this manual, the most up-to-date version of the model document is always available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/ConfidentialityMOU.pdf>

Whereas, all parties agree that the exchange of information between criminal justice and treatment systems is allowable and encouraged within the parameters of 42 CFR, Part 2, and 45 CFR, Parts 160 and 164;

Whereas, all parties mutually agree that this agreement shall be interpreted in light of, and consistent with governing state and federal laws;

Whereas, all parties agree that information identifying the clients or any information regarding client treatment should be shared pursuant to a validly executed Consent to Release Information and only to the degree it is necessary for the recipient of the information to perform his or her role; and that information shared for evaluation of the quality and effectiveness of services will be used when protections of the client's identity have been utilized;

Now, therefore, the parties agree that this memorandum of understanding reflects their understanding and agreement as to the permitted and prohibited sharing and uses of information in the legal process.

III. Definitions

1. "Criminal justice information" or "criminal justice records" means any information, whether recorded or not, relating to an individual's involvement with the criminal justice system, including confidential records and files maintained by clerks of the court, law enforcement agencies, court probation departments, and the Michigan Department of Corrections.
2. "Confidential information" means any information, whether recorded or not, relating to an individual served by a substance use, mental health, or developmental disabilities service provider that is received in connection with the performance of any treating provider relationship.
3. "Treatment provider" means any person or entity at one location whose primary purpose is to provide services for the care, treatment, habilitation, or rehabilitation of substance users, the mentally ill, or the developmentally disabled.
4. "Community mental health services provider" or "CMHSP" means an area mental health, developmental disabilities, and substance use disorder authority that is responsible for the management and oversight of the public system of mental health, developmental disabilities, and substance use services at the community level and that is under contract with the Department of Health and Human Services to operate the combined Medicaid Waiver program authorized under Section 1915(b) and Section 1915(c) of the Social Security Act.
5. "Community-based provider" means any person or entity whose purpose is to provide, support engagement in, and/or coordinate services for the care of a participant, which may include assessment, treatment, community service, education, employment, or recreational activities.

6. “Disclose” or “disclosure” means a communication of patient identifying information, the affirmative verification or denial of another person’s communication of patient identifying information, or the communication of any information from the record of a patient who has been identified.

IV. Each of the Parties agrees to:

1. Promote a mutual understanding of the allowances and limitations outlined in 42 CFR, Part 2, and 45 CFR, Parts 160 and 164, and other applicable state and federal laws;
2. Work together with the other agencies listed in this MOU to facilitate information sharing and to ensure that confidential information is disseminated only to the appropriate persons or agencies as provided by law or otherwise pursuant to a lawfully obtained consent form;
3. Share information as necessary, and in compliance with 42 CFR and HIPAA, to appraise participants’ progress in, and compliance with, the conditions of the **[name of problem solving court program]**.
4. Train relevant staff in procedures for interagency collaboration and information sharing;
5. Comply with relevant state and federal law and other applicable local rules and ethical standards, which relate to records use, dissemination, and retention/destruction;
6. Comply with relevant state and federal law and other applicable local rules and ethical standards, which relate to the dissemination of information, whether written or oral.
7. Only disclose a participant’s confidential information if there is a signed consent to release information form on file and it is accompanied by one of the following written statements:
 - a. This information has been disclosed to you from records protected by federal confidentiality rules (42 CFR, Part 2). The federal rules prohibit you from making any further disclosure of information in this record that identifies a patient as having or having had a substance use disorder either directly, by reference to publicly available information, or through verification of such identification by another person unless further disclosure is expressly permitted by the written consent of the individual whose information is being disclosed or as otherwise permitted by 42 CFR, Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose (see § 2.31). The federal rules restrict any use of the information to investigate or prosecute with regard to a crime any patient with a substance use disorder, except as provided at §§ 2.12(c)(5) and 2.65; or
 - b. 42 CFR, Part 2 prohibits unauthorized disclosure of these records.

8. Develop appropriate internal written policies to ensure that confidential information concerning clients is disseminated only to appropriate personnel.

V. The [name of problem solving court program] agrees to:

1. Share criminal justice information with any party to this agreement, pursuant to a court order or the written consent of the client in order to assess the client's needs and develop an appropriate service or treatment plan for the client.
2. Share criminal justice information with any party to this agreement, upon request and to the extent permitted by state and federal law and regulations, for the protection of the client and others.
3. Maintain the confidentiality of criminal justice records and limit disclosure of confidential information concerning clients only to authorized persons.
4. Ensure that any statements made by a client during evaluation and intake are protected, pursuant to the client's privilege against self-incrimination and right to counsel under the Fifth and Sixth Amendments to the United States Constitution, and MCL 600.1064(4).
5. Ensure that no presentencing report or risk and needs assessment is completed prior to an entry of a guilty plea without the written consent of the client, or the client's attorney.
6. Share sentencing information as appropriate with other parties to this agreement, as necessary, in order to comply with any evaluation, assessment, or treatment, ordered by the court.
7. Ensure that criminal justice records maintained by the court are retained and destroyed, in accordance with MCL 399.5, MCL 600.1428, MCL 691.1101, MCR 3.925, MCR 8.119(K).
8. Maintain in accordance with 42 CFR, Part 2, and 45 CFR, Parts 160 and 164, as applicable, the confidentiality of substance use, mental health, and developmental disabilities services information obtained from an entity whose client information is governed by 42 CFR, Part 2, or 45 CFR, Parts 160 and 164, which includes substance use, mental health, or developmental disabilities services providers and community mental health service providers.
9. Use and disclose substance use, mental health, or developmental disabilities information acquired pursuant to an "[name of problem solving court program] Consent for Release of Information" (or any valid Consent for Release of Information) only as permitted by the terms of the executed Consent for Release of Information form, unless otherwise permitted or required by law.
10. Abide by 42 CFR, Part 2, Sec 2.32, which prohibits redisclosure of substance use disorder information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR, Part 2.

11. Ensure that information obtained pursuant to the problem solving court agreement and the program's Consent for Release of Information will not be used to initiate or substantiate any criminal charges against a participant except as otherwise authorized by 42 CFR, Part 2, Section 2.12(d)(1).

VI. Each Treatment Provider, whether providing assessment/evaluation/diagnostic services or treatment services, or both agrees to:

1. Disclose confidential information to any party of this agreement who is designated on a validly executed "[name of problem solving court program] Consent for Release of Information" (or any other valid consent for Release of Information form) in accordance with the terms and limitations of the Consent for Release of Information form.
2. Share criminal justice information with any party to this agreement, upon request and to the extent permitted by federal law and regulations, only for the protection of the client and others.
3. Use and disclose criminal justice information acquired pursuant to a "[name of problem solving court program] Consent for Release of Information" (or any other valid Consent for Release of Information form) only as permitted by the terms of the executed Consent for Release of Information form, unless otherwise permitted or required by law.
4. Abide by 42 CFR, Part 2, Sec 2.32, which prohibits redisclosure of substance use disorder information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR, Part 2.

VII. Each Community Mental Health Services Provider agrees to:

1. Disclose confidential information to any party of this agreement who is designated on a validly executed "[name of problem solving court program] Consent for Release of Information" (or any other valid Consent for Release of Information form) in accordance with the terms and limitations of the Consent for Release of Information form.
2. Share criminal justice information with any party to this agreement, upon request and to the extent permitted by federal law and regulations, only for the protection of the client and others.
3. Use and disclose criminal justice information acquired pursuant to a "[name of problem solving court program] Consent for Release of Information" (or any other valid Consent for Release of Information form) only as permitted by the terms of the executed Consent for Release of Information form, unless otherwise permitted or required by law.
4. Abide by 42 CFR, Part 2, Sec 2.32, which prohibits redisclosure of substance use disorder information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR, Part 2.

VIII. Administration of the Memorandum of Understanding

1. Term of Agreement:

This agreement is effective for one year upon the date of the final signature and shall renew automatically for subsequent one-year terms unless otherwise modified. Any signatory to this agreement may terminate participation upon thirty days' notice to all other signatories to the agreement.

2. Modification of Agreement:

Modification of this Agreement shall be made by formal consent of all parties, pursuant to the issuance of a written amendment, signed and dated by the parties, prior to any changes.

3. Other Interagency Agreements:

This agreement does not preclude or preempt each of the agencies individually entering into an agreement with one or more parties to this agreement, nor does it supplant any existing agreement between such parties.

4. Signatures of Parties to this Agreement:

In witness whereof, the parties hereto have entered into this agreement as evidenced by their signatures below. A certified copy of the agreement shall be provided to each signatory to the Agreement. The original Agreement shall be filed with the Clerk of the **[court number, and type]** Court.

Honorable **[name]**, Chief Judge, **[court number and type]** Court

Signature

Date

Honorable **[name]**, **[name of problem solving court]** Judge, **[court number and type]** Court

Signature

Date

[Name], Program Coordinator, [name of problem solving court]

Signature

Date

[Name and title], team member, [name of county] prosecutor's office

Signature

Date

[Name and title], authorizing official on behalf of [name of county] prosecutor's office

Signature

Date

[Name], defense attorney, team member, [name of law firm]

Signature

Date

[Name], defense attorney, authorizing official on behalf of [name of law firm]

Signature

Date

[Name and title], team member, [name of law enforcement agency]

Signature

Date

Name and title], authorizing official on behalf of [name of law enforcement agency]

Signature

Date

[Name and title], [agency name], team member, Community Mental Health Services provider

Signature

Date

[Name and title], [agency name], authorizing official on behalf of Community Mental Health Services provider

Signature

Date

[Name and title], [agency name], team member, [type of treatment/ancillary] services provider

Signature

Date

[Name and title], [agency name], authorizing official on behalf of [type of treatment/ancillary] services provider

Signature

Date

Mark F Botts, L. B. (2015, April 7). *<https://www.sog.unc.edu/publications/reports/north-carolina-juvenile-justice-%E2%80%93-behavioral-health-information-sharing-guide>*. Retrieved April 11, 2018, from <https://www.sog.unc.edu/sites/www.sog.unc.edu/files/Information%20Sharing%20Guide%20FINAL%20PDF%20to%20authors%202015-06-25.pdf>

IX. Attachments

[Insert list of forms or other pertinent documents to implement the above agreement. Delete section if there are no attachments.]

Attachment 1: **[Name of problem solving court]** procedures and/or policies regarding confidentiality

Attachment 2: **[Name of problem solving court]** consent to release information (form)

Attachment 3: **[Name of problem solving court]** visitor confidentiality agreement

Attachment 4: Notice of Prohibition against Redisclosure

Appendix H

Model Visitor Confidentiality and Consent for Release of Information

MODEL VISITOR CONFIDENTIALITY FORM³⁵
[Name of PSC] Program Visitor Confidentiality Form

I, _____, as a guest of the [name of PSC] Program, recognize my responsibility to maintain the confidentiality of the [name of PSC] Program, and hereby agree that:

1. Any and all information discussed at the [name of PSC] staffing team meeting must remain confidential and shall not be revealed to anyone.
2. If I receive a copy of case reports for a staffing team meeting, I will return all reports in their entirety to a team member at the end of the staffing team meeting.
3. I shall abide by the [name of PSC] program's MOU regarding confidentiality (attached).
4. I understand that alcohol and/or drug treatment records and mental health records are protected under the federal regulations governing Confidentiality and Drug Abuse Patient Records, 42 CFR, Part 2, and the Health Insurance Portability and Accountability Act of 1996 (HIPAA), 45 CFR, Parts 160 & 164, and I shall abide by the confidentiality provisions of the law.
5. By signing this form, I confirm that I have read and agree to the above statements.

Signature of guest

Date

Printed name of guest

Date

³⁵ This model document is provided by SCAO as a resource to assist problem-solving courts in complying with a standard for certification. It is not intended to be legal advice or to include all federal confidentiality requirements.

Since there might be a delay in updating the model document on the web page and updating the model document in this manual, the most up-to-date version of the model document is always available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VisitorConfidentialityForm.pdf>

[Name of PSC program]
Consent for Release of Information
Observation of Staffing Meeting

Participant's Full Name: _____

DOB: _____

I authorize the team members of the **[name of PSC program]**, specifically:

[Name of PSC] program Judge and staff

[Name of county] MDOC

[Name of district court] probation department

[Name of county] prosecutor's office

[Name of treatment agency]

[Name of law enforcement agency]

[Name of law firm/office, or name of defense attorney on team]

[Name of drug and alcohol testing agency]

[Name of electronic monitoring agency]

[Name of county] Office of Community Corrections

to release information to the following parties:

1. Name of PSC observer: _____

Title: _____

Agency/program: _____

2. Name of PSC observer: _____

Title: _____

Agency/program: _____

3. Name of PSC observer: _____

Title: _____

Agency/program: _____

4. Name of PSC observer: _____

Title: _____

Agency/program: _____

To disclose information discussed at the staffing meeting, held on **[date]**, which may include the following information:

INFORMATION TO BE SHARED

1. Name, address, and other personal identifying information of the participant
2. **[Name of PSC program]** assessments (GAIN, COMPAS, risk and needs, etc.)
3. **[Name of PSC program]** personal Data Sheet/Social History
4. **[Name of PSC program]** Individualized Service Plans, Commitment Summaries, Behavior Summaries, and Updates
5. Substance abuse assessment and treatment information, including treatment plans and discharge summaries
6. Substance abuse treatment attendance, progress and compliance reports
7. Mental health assessment and treatment information, including treatment plans and discharge summaries
8. Mental health treatment progress and compliance reports
9. Drug screening and testing results
10. Ignition Interlock and electronic monitoring information
11. Developmental disabilities assessment and service information, including service plans and discharge summaries
12. Health information
13. Reportable communicable disease information, including HIV, sexually transmitted infections, hepatitis, and tuberculosis
14. Health plan or health benefits information
15. Service plan and treatment outcomes
16. Other (specify, if any): _____

Note: I authorize all of the foregoing information to be shared unless I indicate here, by number, one or more categories of information not to be shared: _____

PURPOSE OF USE AND DISCLOSURE

The purposes for the disclosures authorized by this form are:

1. To assist **[name of court/agency]** in planning, implementation, or enhancement of their drug treatment court.
2. For the evaluation of **[name of PSC program]**.
3. Other (please specify): _____

REDISCLASURE AND CONFIDENTIALITY

Once health care information is disclosed pursuant to this signed authorization, I understand that the federal health privacy law (45 CFR, Parts 160 and 164) protecting health information may not apply to the recipient of the information and, therefore, may not prohibit the recipient from redisclosing information to others. However, substance abuse treatment information protected by federal law (42 CFR., Part 2), shall remain confidential and must not be redisclosed by the recipient except as authorized by those laws or this authorization.

CONSENT EXPIRATION

The date, event, or condition upon which consent expires must ensure that the consent will last no longer than reasonably necessary to serve the purpose for which it is given.

This consent for release of information shall expire on **[date of the day following observed staffing]**.

SIGNATURE CONSENTING TO RELEASE OF INFORMATION

Participant signature

Date

Staff witness signature

Date

Staff witness printed name

Appendix I

Model Program MOU

Model Memorandum of Understanding^{36,37} **[Name of veterans treatment court]**

This is an understanding between the [name of county] Prosecuting Attorney; [name of county] sheriff's department; Michigan Department of Corrections; [court number] district court and the district court probation department; [court number] circuit court and the circuit court probation department; [name of defense counsel representative], defense counsel representative; [name of treatment provider agency], treatment provider; [name of substance use/abuse treatment agency], substance abuse services; U.S. Department of Veterans Affairs; and [name of veterans treatment court] judge and program coordinator.

I. Purpose

The purpose of this Memorandum of Understanding (MOU) is to describe duties and allocate responsibilities for members of the [name of veterans treatment court] team. The MOU also establishes team member responsibilities and requirements for maintaining compliance with the federal law of confidentiality (42 CFR, Part 2), the Health Insurance Portability and Accountability Act (HIPAA, 45 CFR, Parts 160 and subparts A and E of Part 164), and the Michigan Veterans Court Statute (MCL 600.1200).

II. Terms/Definitions

1. Participant: Any person referred to the [name of veterans treatment court], currently being screened as a candidate for [name of veterans treatment court] (including those who are ultimately denied entry to the program), currently participating in [name of veterans treatment court], or someone who has been discharged from the [name of veterans treatment court].
3. Policies and Procedures Manual: Policy and procedure manuals document policies and procedures designed to influence and determine all major decisions and actions, and all activities that take place within the boundaries set by them. Procedures are the specific methods employed to express policies in action in day-to-day operations of the organization.
4. Redisclosure: The act of sharing or releasing health information that was received from another source (e.g., external facility or provider) and made part of a patient's health record or the organization's designated record set.
5. Stakeholders: A person, group or organization that has interest or concern in an organization.
6. Treatment services: Any services provided by a licensed clinician or by an employee of an agency providing therapeutic services for substance use disorder, mental health, or developmental disabilities.

³⁶ Per MCL 600.1201(2) the court may adopt or institute a veterans treatment court if it enters into a memorandum of understanding.

³⁷ This model memorandum of understanding is provided by SCAO as a resource and for informational purposes only to facilitate the operation of problem solving courts by local units of government and courts in compliance with statutory requirements. SCAO's sharing this model agreement is not intended (and cannot be construed) as legal advice - parties to the agreement should consult with their attorneys before entering into any agreement or contract.

Since there might be a delay in updating the model document on the web page and updating the model document in this manual, the most up-to-date version of the model document is always available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VTC-ProgramMOU.pdf>

7. Waiver: The “voluntary relinquishment of a known right.” (Kelly v Allegan Circuit Judge, 1969)

III. Goals and Mission of the [name of veterans treatment court]

1. The below parties agree to share the following vision for the [name of veterans treatment court]:
 - A. Enhance the quality of life throughout [name of county] County;
 - B. Provide leadership through innovative services;
 - C. Continuously improve services;
 - D. Achieve program goals through teamwork;
 - E. Break the generational cycle of criminality and substance use;
 - F. Ensure each component of the veterans treatment court is aware and in compliance with federal confidentiality law requirements.
2. We endorse the goals and mission of the [name of veterans treatment court] in order for participants to eliminate future criminal behavior and improve the quality of their lives. For this program to be successful, cooperation must occur within a network of systems to facilitate and achieve the mission, challenge, and vision of the [name of veterans treatment court];
3. We agree that the mission of the [name of veterans treatment court] shall be to successfully stabilize substance using and mentally ill individuals while maintaining public safety and;
4. We agree to the following challenge of the [name of veterans treatment court]: Engaging substance using and/or mentally ill individuals involved in the criminal justice system in a continuum of treatment services and providing them with appropriate intervention through treatment, rehabilitative programming, reinforcement, and monitoring.

IV. Guiding Principles of the [name of veterans treatment court]

There are ten principles under which the respective agencies work cooperatively:

- A. Veterans treatment court programs promote positive legal outcomes by well-defined terms of participation that facilitate engagement in treatment that corresponds to the level of risk to the community.
- B. Veterans treatment court offers an opportunity for veterans whose mental illness or substance use disorder is related to their service and contributed to their crime, a program that integrates alcohol, drug treatment, and mental health services with justice system case processing
- C. Treatment intervention should occur early on upon entry to the criminal justice system to achieve maximum treatment outcomes.
- D. Thorough assessment and evaluation is a critical component of the veterans treatment court program.
- E. Participants with mental illness or substance use disorders cannot maximize their treatment potential without appropriate treatment intervention that includes their families.
- F. Participant accountability is foremost in the program, with written program agreements and court monitoring of behavior on a regular basis. Court monitoring will include sanctioning or treatment adjustment for negative behaviors and positive rewards for improved behaviors.
- G. Veterans treatment court programs are established with written protocols, which are well-defined and documented through the policies and procedures manual. The

program manual will be updated annually, to respond to the changes in the needs of the programs, participants, families, agencies, and community.

- H. Preadjudication participant entry into the veterans treatment court program shall be governed by written eligibility criteria as established by the veterans treatment court team.
- I. Information about participant progress, participant family progress, and the functioning of the veterans treatment court program shall be made available to all team members, as guided by the [name of veterans treatment court] policy and procedures regarding sharing or distribution of confidential information.
- J. Effective evaluation of the veterans treatment court program shall be sought with appropriate responses being made relative to these evaluations.
- K. Forging of partnerships among veterans treatment court, veterans administration, public agencies, and community-based organizations generates local support and enhances veteran treatment court effectiveness.

V. Roles of the Parties of the [insert name of veterans treatment court]³⁸

[Individual veterans treatment courts are to amend and modify their MOU in accordance with their decisions as to who makes up their team and those members' appropriate roles and responsibilities.]

The roles of the parties are as follows:

- A. Veterans treatment court judge:
 - i. Serve as the leader of the team.
 - ii. Attend staffing meetings, and provide over status review hearings.
 - iii. Engage the community to generate local support for the veterans treatment court.
 - iv. Communicate with the participants in a positive manner and make final decisions regarding incentives and sanctions and program continuation.
 - v. Consider the perspective of all team members before making final decisions that affect participants' welfare or liberty interests, and explain the rationale for such decisions to team members and participants.
 - vi. Rely on the expert input of duly trained treatment professionals when imposing treatment related conditions on the participants.
 - vii. Provide program oversight and ensure communication and partnership with treatment.
 - viii. On an annual basis, attend current training events on legal and constitutional issues in veterans treatment courts, judicial ethics, evidence-based substance abuse and mental health treatment, behavior modification, and/or community supervision.
 - ix. Shall consider whether to terminate a participant's participation in the drug treatment program if that participant is accused of a new crime. If a participant is convicted of a felony for an offense that occurred after being admitted to drug treatment court, the judge must terminate the participant's participation in the program.³⁹
- B. Prosecuting attorney:
 - i. Provide legal screening of eligible participants.

³⁸ Per MCL 600.1201(2) "The memorandum of understanding shall describe the role of each party . . ."

³⁹ Per MCL 600.1208 "The veterans treatment court shall be notified if the veterans treatment court participant is accused of a new crime, and the judge shall consider whether to terminate the participant's participation in the veterans treatment court program in conformity with the memorandum of understanding . . ."

- ii. Attend staffing meetings and review hearings and provide input on incentives and sanctions for participants.
- iii. Represent the interests of the prosecutor and law enforcement.
- iv. Advocate for public safety.
- v. Advocate for victim interest.
- vi. Hold participants accountable for meeting their obligations.
- vii. If a plea agreement is made based on completion of the program, complete appropriate court documents for resultant modification(s) upon participant's successful completion of the program (reduced charge, nolle prosequi, etc.).
- viii. May help resolve other pending legal cases that impact participants' legal status or eligibility.

C. Office of Community Corrections:

- i. Attend staffing meetings and provide input on incentives and sanctions for participants.
- ii. Share information as necessary, and in compliance with 42 CFR and HIPAA, to appraise participants' progress in, and compliance with, the conditions of veterans treatment court.
- iii. Provide feedback to the court on the program participants' progress in community corrections programs.

D. County sheriff's department

- i. Attend staffing meetings and provide input on incentives and sanctions for participants.
- ii. Provide deputies to assist with home checks for participants (limited)
- iii. Provide feedback, suggestions, and ideas on the operation of the veterans treatment court.

D. Probation officer/case manager:

- i. Attend staffing meetings and review hearings and provide input on incentives and sanctions for participants.
- ii. Share information as necessary, and in compliance with 42 CFR and HIPAA, to appraise participants' progress in, and compliance with, the conditions of veterans treatment court.
- iii. Provide probation oversight for all program participants.
- iv. Work with the program coordinator in supervising and monitoring the individuals in the program.
- v. Prepare presentence reports as needed.
- vi. Schedule probation violations or show cause hearings for participants who have violated the program rules and are subject to dismissal.

- vii. On an annual basis, attend current training events on legal and constitutional issues in veterans treatment courts, evidence-based substance abuse and mental health treatment, behavior modification, and/or community supervision.
 - viii. Enter data into the DCCMIS system.
- E. Defense counsel representative:
- i. Attend staffing meetings and review hearings and provide input on incentives and sanctions for participants.
 - ii. Ensure that defendants' procedural and due process rights are followed.
 - iii. Ensure that the participant is treated fairly and that the veterans treatment court team follows its own rules.
 - iv. Provide feedback, suggestions, and ideas on the operation of the veterans treatment court.
- F. Project coordinator:
- i. Attend staffing meetings and provide input on incentives and sanctions for participants.
 - ii. Share information as necessary, and in compliance with 42 CFR and HIPAA, to appraise participants' progress in, and compliance with, the conditions of veterans treatment court.
 - iii. Arrange for additional screenings of persons aside from the prosecutor's legal screening.
 - iv. Answer inquiries from defense attorneys on possible eligibility.
 - v. Enter data into DCCMIS system.
 - vi. Liaison with treatment providers and drug testing contractor, probation, and residential treatment facilities.
 - vii. On an annual basis, attend current training events on legal and constitutional issues in veterans treatment courts, evidence-based substance abuse and mental health treatment, behavior modification, and/or community supervision.
 - viii. Ensure that new team members are provided with a formal training within three months of joining the team on the topics of confidentiality, and his or her role on the team, and that the new team member is provided with copies of all program policy and procedure manuals, the participant handbook, and a copy of all current memoranda of understanding.
- G. Treatment provider:
- i. Attend staffing meetings and review hearings and provide input on incentives and sanctions for participants.
 - ii. Share information as necessary, and in compliance with 42 CFR and HIPAA, to appraise participants' progress in treatment and compliance with the conditions of veterans treatment court.
 - iii. Conduct assessments to determine program eligibility, appropriate treatment services, and progress in treatment.
 - iv. Report on progress and attendance of participants in treatment services.
 - v. Manage delivery of treatment services.
 - vi. Administer behavioral or cognitive-behavioral treatments that are documented in manuals and have been demonstrated to improve outcomes.
 - vii. Provide clinical case management.
 - viii. Offer insights and suggestions on the treatment plans of individuals in the program.
 - ix. On an annual basis, attend current training events on legal and constitutional issues in veterans treatment courts, evidence-based substance abuse and mental health treatment, behavior modification, and/or community supervision.
 - x. Enter data into the DCCMIS system.

H. Veterans Justice Outreach Specialist:

- i. Attend staffing meetings and review hearings and provide input on incentives and sanctions for participants.
- ii. Share information as necessary, and in compliance with 42 CFR and HIPAA, to appraise participants' progress in treatment and compliance with the conditions of veterans treatment court.
- iii. Report on progress of participants, and offer insights and suggestions on those participants who have mental health issues in addition to substance abuse problems.
- iv. Connect veterans to VA treatment services and homeless programs.
- v. On an annual basis, attend current training events on legal and constitutional issues in veterans treatment courts, evidence-based substance abuse and mental health treatment, behavior modification, and/or community supervision.

VI. Deferrals, Delays, and Deviation from Sentencing Guidelines⁴⁰

Under MCL 600.1205(2), the prosecutor must approve an individual's admission into the [name of veterans treatment court] if the individual will be eligible for discharge and dismissal of an offense, delayed sentence, or deviation from the sentencing guidelines.⁴¹

VII. Program Fee⁴²

The program charges a fee of [amount of fee] to each participant, to be paid in [specify due date or payment parameters]. In accordance with MCL 600.1206(4) the clerk of the veterans treatment court shall transmit the fees collected to the treasurer of the local funding unit at the end of each month. The fee must be reasonable and calculated based on costs reasonably related to administering the program that are not covered by other funding such as insurance, block grants, PA 511, or another agency. These costs include [list cost of program personnel, treatment, drug testing, supplies, travel costs, training, and any other costs incurred by the veterans treatment court to administer the program].

VIII. Confidentiality

A veterans treatment court's performance of, or request for, an assessment of chemical dependency of a veterans treatment court participant, or a referral to treatment, places the veterans court within the parameters of 42 CFR, Part 2. Additionally, treatment agencies partnering with the [name of drug treatment court] must comply with the Health Insurance Portability and Accountability Act (HIPAA) that protects confidentiality and the security of protected health information, therefore, all parties agree to abide by the following:

- A. Confidential problem solving court information and records, including information

⁴⁰ Per MCL 600.1205(2) "An individual who may be eligible for discharge and dismissal of an offense, delayed sentence, deferred entry of judgment, or deviation from the sentencing guidelines shall not be admitted to a veterans treatment court unless the prosecutor first approves the admission of the individual into the veterans treatment court in conformity with the memorandum of understanding under section 1201(2)."

⁴¹ Per MCL 600.1209(4) "...the court, with the agreement of the prosecutor and in conformity with the terms and conditions of the memorandum of understanding under section 1201(2), may discharge and dismiss the proceedings against an individual who meets..." the criteria of MCL 600.1209(4) (a) through 600.1209(4)(e).

⁴² Per MCL 600.1206(4) "The veterans treatment court may require an individual admitted into the court to pay a veterans treatment court fee that is reasonably related to the cost to the court for administering the veterans treatment court program as provided in the memorandum of understanding under section 1201(2)."

- obtained as a result of participating in a preadmission screening and evaluation assessment, is confidential and is exempt from disclosure under the Freedom of Information Act (FOIA), and may not be used to initiate or to substantiate any criminal charges against a participant or to conduct any investigation of a participant, unless it reveals criminal acts other than, or inconsistent with, personal drug use. (42 CFR, Part 2)
- B. State law may neither authorize nor compel any disclosure prohibited by the federal regulations, but where state law prohibits disclosure that would be permissible under the federal regulations, the stricter standard applies.
 - C. Problem solving courts may receive or release information or records of participants only with the specific knowing, voluntary, and written consent of the participant, or under certain very limited exceptions. (42 CFR, Sections 2.14 through 2.35)
 - D. The participant must be advised, orally and in writing, that federal law protects the confidentiality of treatment records. The notice must cite Section 290dd-2 and the implementing regulations (Sections 2.1 through 24 of Title 42 of the code of Federal Regulations), and must state the following:
 - i. Treatment information is ordinarily kept confidential;
 - ii. It is a crime to violate this confidentiality requirement, which the participant may report to appropriate authorities, [insert name and phone number of appropriate attorney general's office];
 - iii. Notwithstanding this confidentiality requirement, covered information may be released under specified circumstances [insert list of specific circumstances], and may include medical emergency, crimes on the premises, crimes against staff, administration/qualified service providers working with drug court, and outside auditors, central registries and researchers); and
 - iv. Federal law does not protect information relating to the abuse or neglect of a child, state child abuse laws, court orders signed pursuant to 42 CFR Part 2 for release of specific information, state laws relating to cause of death and duty to protect others, and to warn of serious imminent harm.
 - E. Any documented treatment information distributed on the basis of the treatment participant's consent should be accompanied by a Notice of Prohibition Against Redisclosure. The prohibition on redisclosure only applies to information that would identify, directly or indirectly, an individual as having been diagnosed, treated, or referred for treatment for a substance use disorder, such as indicated through standard medical codes, descriptive language, or both, and allows other health-related information shared by the part 2 program to be redisclosed, if permissible under other applicable laws. (42 CFR, Section 2.32)
 - F. Confidential records should be kept in a secure room and locked container. Access to confidential records must be limited to authorized individuals. (42 CFR, Section 2.16)
 - G. The Health Insurance Portability and Accountability Act (HIPAA) is a federal law that protects confidentiality and the security of protected health information. While it does not directly apply to veterans treatment courts, HIPAA does apply to the treatment agencies partnering with veterans treatment courts, so veterans courts must also comply with HIPAA.
 - H. Veterans treatment court team members shall be familiar with relevant federal and state laws and regulations in order to develop or modify appropriate policies and procedures regarding confidentiality.
 - I. All file storage systems shall include procedures for limiting access to records after the participant's consent expires or is revoked. Thus, paper records that can be accessed by

all veterans court personnel during the duration of the participant's consent are transferred to a more restricted storage facility as soon as the consent is terminated. Records on computers are sealed by changing the password or other access.

- J. All team members shall abide by the attached [name of veterans treatment court] policy and procedures regarding sharing or distribution of confidential information which regulates and controls access to and use of written and electronic confidential records. Written procedures include requests for access to confidential information by the public, attorneys, or any interested party outside the treatment court team, and formal policies and procedures addressing security, including sanitization of associated media, for both paper and electronic records. (42 CFR, Section 2.16)
- K. Electronic data that is subject to confidentiality standards shall be protected by security walls and password-protected. Access shall be limited, and disclosure/redisclosure is subject to approval by the treatment court judge and team.
- L. The veterans treatment court team shall decide if pre-court staffing meetings will be closed to participants and the public and describe its policy in the participant agreement. If the staffing is open to visitors the participant must be provided the name of the visitor(s) and must consent in writing. All visitors shall be required to sign an agreement that they adhere to the confidentiality provisions of the law (and particularly as to the rule against redisclosure) and the other requirements of the [name of veterans treatment court] MOU.
- M. The parties, including each party's employees and other agents, shall maintain the confidentiality of all records generated during the term of this MOU in accordance with all applicable state and federal laws and regulations, including, but not limited to, 42 CFR Part 2.

IX. Term of Agreement⁴³

This agreement is effective for one year upon the date of the final signature and shall renew automatically for subsequent one-year terms unless otherwise modified. Any signatory to this agreement may terminate participation upon thirty days' notice to all other signatories.

X. Agency Representatives

[Individual veterans treatment courts are to amend and modify their MOU in accordance with their decisions as to stakeholder agencies.]

This MOU will be administered by the [name of veterans treatment court] local team, which consists of the following stakeholder agency representation: [name of county] Prosecuting Attorney; [name of county] Sheriff Department, Michigan Department of Corrections, [court number] District Court and the probation department; [court number] Circuit Court and the probation department; [name of defense counsel representative] defense counsel representative; [name of treatment provider agency] treatment provider; [name of substance use/abuse treatment agency] substance abuse services; the U.S. Department of Veterans Affairs, and [name of veterans treatment court] project coordinator.

⁴³ Per MCL 600.1201(2) "The memorandum of understanding shall describe the role of each party, and the conditions for which the memorandum of understanding must be renewed and amended."

XI. Modification of Agreement⁴⁴

Modification of this agreement shall be made by formal consent of all parties, pursuant to the issuance of a written amendment, signed and dated by the parties, prior to any changes.

XII. Other Interagency Agreements

This agreement does not preclude or preempt each of the agencies individually entering into an agreement with one or more parties to this agreement, nor does it supplant any existing agreement between such parties.

XIII. Signatures of Parties to this Agreement^{45 46}

The parties have entered into this agreement as evidenced by their signatures below. A certified copy of the agreement shall be provided to each signatory to the agreement. The original agreement shall be filed with the clerk of [court number] [court type] Court.

Honorable [name], Chief Judge, [court number and type] Court

Signature

Date

Honorable [name], [name of veterans treatment court] Judge, [court number and type] Court

Signature

Date

[Name], Chief Prosecuting Attorney, [name of county]

Signature

Date

⁴⁴ Per MCL 600.1201(2) “The memorandum of understanding shall describe the role of each party, and the conditions for which the memorandum of understanding must be renewed and amended.”

⁴⁵ Per MCL 600.1201(2) The court may adopt or institute a veterans treatment court if it enters into a memorandum of understanding with “...a representative of the criminal defense bar, a representative or representatives of community treatment providers, a representative or representatives of veterans service organizations in the circuit or district court district, and a representative or representatives of the United States Department of Veterans Affairs.” The memorandum of understanding must also include the prosecuting attorney “...if the veterans treatment court will include in its program individuals who may be eligible for discharge and dismissal of an offense, a delayed sentence, deferred entry of judgment, or a sentence involving deviation from the sentencing guidelines.”

⁴⁶ If this is the only program memorandum of understanding with respect to confidentiality, then all team members, and replacement team members, must sign this memorandum of understanding.

[Name], [title], U.S. Department of Veterans Affairs

Signature

Date

[Name and title], [agency name], provider of [type of treatment services] services

Signature

Date

[Name and title], [name of veterans service organization in the circuit/district], provider of veterans services

Signature

Date

[Name], Sheriff, [name of county] Sheriff's Department

Signature

Date

[Name and title], Michigan Department of Corrections

Signature

Date

[Name], defense attorney, [name of firm/agency]

Signature

Date

[Name], Court Administrator, [court number] Circuit Court

Signature

Date

[Name], Court Administrator, [court number] District Court

Signature

Date

[Name], Project Coordinator, [name of veterans treatment court]

Signature

Date

[Name and title], Probation Department, [court number] District Court

Signature

Date

XIV. Attachments

[Insert here list of forms or other pertinent documents to implement the above agreement.
Delete section if there are no attachments.]

- Attachment 1: The 10 Key Components of Veterans Treatment Courts
- Attachment 2: [Name of veterans treatment court] policy and procedures regarding sharing or
distribution of confidential information
- Attachment 3: Policy and Procedure Manual
- Attachment 4: [Name of veterans treatment court] consent to release information (form)
- Attachment 5: [Name of veterans treatment court] visitor confidentiality agreement
- Attachment 6: Notice of Prohibition Against Redisclosure

Appendix J

Model Veterans Treatment Court Agreement to Participate and Waiver

AGREEMENT TO PARTICIPATE⁴⁷ [Name of veterans treatment court program]

I, **[name of participant]**, agree to participate in the **[name of veterans treatment court]** Program. I agree to follow all terms and conditions of the veterans treatment court program as established by the court and the veterans treatment court team.

I agree to:

1. Complete any evaluations or assessments as directed by the veterans treatment court, and follow the recommendations thereof. The treatment recommendations will be shared with the veterans treatment court team.
2. Work with treatment staff to develop a treatment plan and follow the plan accordingly, including aftercare and continuing care recommendations.
3. Meet with a member of a veteran service organization or a county veteran counselor, as directed by the veterans treatment court, to discuss available veterans benefit programs for which I may qualify.
4. Not use, possess, or consume alcohol and/or other illegal or controlled substances, nor be in the presence of any person using, possessing, or consuming said substances; nor enter premises where alcohol is the primary source of revenue. I understand if I am found to be under the influence of drugs, alcohol, or medication not prescribed to me I may be sanctioned and/or terminated from the program.
5. Submit to PBT's, electronic alcohol monitoring, and/or drug and alcohol screening as requested.
6. Be employed or enrolled in an educational program, or participate in another positive activity as directed.
7. Notify the veterans treatment court of any changes in phone number within 24 hours.
8. Not change my place of residence without prior authorization from the veterans treatment court.
9. Notify the veterans treatment court of any police contact, arrest or criminal charge within 24 hours.
10. Make full and truthful reports to the veterans treatment court, as directed by any team member.
11. Not engage in any antisocial, assaultive, threatening, or aggressive behavior.
12. Not leave the state without the prior consent of the veterans treatment court.

⁴⁷ This model document is provided by SCAO as a resource and for informational purposes only to facilitate the operation of problem solving courts by local units of government and courts in compliance with statutory requirements. SCAO's sharing this model agreement is not intended (and cannot be construed) as legal advice.

Since there might be a delay in updating the model document on the web page and updating the model document in this manual, the most up-to-date version of the model document is always available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VTC-AgreementToParticipate.pdf>

13. Maintain the confidentiality of other veterans treatment court participants.
14. Pay all outstanding monies resulting from my conviction including but not limited to: court-ordered fines and costs, including minimum state costs, veterans treatment court fee, court-ordered restitution, crime victims' rights assessments, and pay all, or make substantial contributions toward payment of, the costs of the treatment and the veterans treatment court program services provided to the participant, including, but not limited to, the costs of urinalysis and such testing or any counseling provided. However, if the court determines that the payment of fines, the fee, or costs of treatment would be a substantial hardship for me or would interfere with my substance abuse treatment or mental health treatment, the court may waive all or part of those fines, the fee, or costs of treatment.
15. Appear in court on all scheduled court dates and to attend all appointments with my probation officer, case manager, mentor, and/or treatment provider.
16. Comply with the program's policies and conditions discussed within the **[name of veterans treatment court program]** Participant Handbook.

I waive the following rights:

1. The right to a speedy trial.
2. The right to representation by an attorney at the review hearings, although I continue to have the right to an attorney for any program violation or probation violation where the facts are contested and a liberty interest is at stake, or if I may be terminated from the veterans treatment court program.
3. With the agreement of the prosecutor, the right to a preliminary hearing.
4. To be present at the team staffing meetings.

I understand that:

1. The veterans treatment court program has a duration of **[minimum to maximum]** months.
2. If I am convicted of a felony for an offense that occurred after I am admitted to veterans treatment court, the judge must terminate my participation in the program per MCL 600.1208.
3. I must have prior permission from the veterans treatment court before consuming any medication.
4. The data in my public and confidential file may be used for research, data analysis and program evaluation by the veterans treatment court, court staff, or individuals or others independent of the veterans treatment court. Any data used in this way will be de-identified prior to distribution.
5. I understand I am required to attend all appointments for court, treatment, ancillary services, and all drug and alcohol testing as scheduled.
6. I understand that veterans treatment court staff may make unscheduled home visits, and I will allow veterans treatment court team members, together with law enforcement officials if accompanied, into my home at any time for supervision or compliance reasons.
7. I recognize that guests of the veterans treatment court may visit the program and attend team meetings, and/or review hearings. Any observers must sign a confidentiality agreement forbidding unlawful disclosure of confidential information to any individual who is not a member of the veterans treatment court team, and my information will not be disclosed unless I sign a consent to release of information specific to that observer.
8. Failure to fully comply with all the terms and conditions of the program listed above may result in the following:

1. Notification to the judge that I am in violation of the program,
 2. Should I admit guilt to or be found guilty of a program violation, sanctions, up to and including jail, may be imposed or additional conditions may be added as determined by the Judge with input from the veterans treatment court team, and/or
 3. Termination from the program
9. I understand that the veterans treatment court may amend these conditions and/or add new conditions, notice of which will be provided to me in writing. I understand that I must comply with the amended or added conditions.

The veterans treatment court coordinator agrees to:

1. Meet with the program participant as needed to help assure successful completion in the program.
2. Report the participant's progress and tests results to the court.
3. Refer the participant to any community agency at the veterans treatment court's disposal which may assist in the participant's recovery.

I have discussed the above listed conditions with my attorney or the veterans treatment court coordinator and received a copy of this form and a copy of the **[name of veterans treatment court program]** Participant Handbook.

Participant Signature

Date

I have discussed the above listed conditions with the participant and have provided a copy of the agreement and the **[name of veterans treatment court program]** Participant Handbook to the participant.

Coordinator Signature

Date

STATE OF MICHIGAN [court number and type]	PSC PROGRAM VIOLATION ⁴⁸	CASE NO. [case/file number]
--	-------------------------------------	--------------------------------

Defendant name and address:	Defendant DOB:
-----------------------------	----------------

Defendant has failed to comply with the PSC program as follows:

Defendant is to appear at _____ on _____ at _____
(location)
(date)
(time)

to address the above program violation(s).

	ADVICE OF RIGHTS	
--	------------------	--

1. You are entitled to a contested program violation hearing to be held on the program violation charge. The hearing is more informal than a trial on the original criminal charge(s); rules of evidence do not apply (except for matters involving privilege); and the program violation charge must be proven by a preponderance (the greater weight) of evidence. If you plead guilty or are found guilty, the court can sentence you up to the same jail term that applied to your original conviction.

2. You have the following basic rights:
 - a. To receive a written notice (copy) of the charge or alleged violation.
 - b. To plead guilty or not guilty or to stand mute. If you stand mute, a plea of not guilty will be entered for you and a contested hearing will be set by the court.
 - c. To have the assistance of an attorney (you can hire any attorney you choose).
 - d. To have an attorney appointed at public expense if you are indigent (without money or the ability to hire an attorney) and if:
 - i. The original offense was punishable by over 92 days in jail; AND,
 - ii. The offense charged required a minimum jail sentence, OR,

Since there might be a delay in updating the model document on the web page and updating the model document in this manual, the most up-to-date version of the model document is always available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/ModelProgVioAdviceRights.pdf>

- iii. The court determines that it may send you to jail, OR,
 - iv. The court determines that it may terminate you from the PSC program.
3. If you have a contested program violation hearing, you have the following rights at the hearing:
 - a. To call witnesses to speak for you at the hearing. You may get an order signed by the court to require witnesses to come to court and testify.
 - b. To see, hear, and question all witnesses against you at the hearing.
 - c. To be a witness for yourself or remain silent. If you testify, your testimony will be considered by the court according to the same standards applied to all other witnesses' testimony. If you choose not to testify on your own behalf, no one may comment on your refusal to testify and the court will not presume or infer any evidence of guilty from the exercise of your right.
 - d. To be presumed innocent until proven guilty by a preponderance (the greater weight) of the evidence.
 4. If you plead guilty and your plea is accepted you will not have a contested hearing of any kind and in addition you will give up the right to an attorney and all of the rights listed in item 3 above.
 5. If you decide to plead guilty without an attorney representing you, and your plea is accepted, you will be giving up your right to have an attorney or court-appointed attorney represent you. Also, if you proceed with a hearing without an attorney or court-appointed attorney representing you, you will be giving up your right to have an attorney represent you at the hearing.
 6. If you waive your rights and plead guilty to violating your program conditions you can offer any explanation to the court along with your guilty plea and you can tell the Judge any other information you want the Judge to know and consider before the court decides on any sentence.
 7. You have the right to be released on bond pending a contested program violation hearing.

The defendant was provided a copy of the alleged violation(s) of the PSC program and a copy of the Advice of Rights for this PSC Program Violation by

_____ on _____ at _____
 (name) (date) (time)

Appendix L

Veterans Treatment Court Admission Conditions

VTC Admission Conditions⁴⁹		
Defendant name:	Defendant DOB:	Defendant case #:
<p>The above named defendant has been referred to the [County or Court] VTC program. Per MCL 600.1204 the court finds the following conditions to be true, prior to the defendant's admission to the [County or Court] VTC program:</p> <ol style="list-style-type: none"> (1) The individual is a veteran. (2) The individual has been assessed and has been shown to meet clinical eligibility criteria under MCL 600.1204b. (3) The individual understands the consequences of entering the VTC program and agrees to comply with all court orders and requirements of the program and treatment providers. (4) The individual is not an unwarranted or substantial risk to the safety of the public or any individual, based upon the screening or assessment and other information presented to the court. (5) The individual is not a violent offender. (6) The individual has completed a preadmission screening and evaluation assessment under section 1203(3) and has agreed to cooperate with any future evaluation assessment as directed by the VTC. (7) The following deferral condition applies: <div style="margin-left: 20px;"> <input type="checkbox"/> The individual has been assigned the status of youthful trainee under section 11 of chapter II of the code of criminal procedure, 1927 PA 175, MCL 762.11. </div> <div style="margin-left: 20px;"> <input type="checkbox"/> The individual has had criminal proceedings against him or her deferred and has been placed _____ on probation under the following: <div style="margin-left: 20px;"> <input type="checkbox"/> Section 7411 of the public health code, 1978 PA 368, MCL 333.7411 (controlled substance), or a local ordinance or another law of this state, another state, or the United States that is substantially similar to that section. </div> <div style="margin-left: 20px;"> <input type="checkbox"/> Section 4a of chapter IX of the code of criminal procedure, 1927 PA 175, MCL 769.4a (domestic violence), or a local ordinance or another law of this state, another state, or the United States that is substantially similar to that section. </div> </div> 		

⁴⁹ This model document is provided by SCAO as a resource and for informational purposes only to facilitate the operation of problem solving courts by local units of government and courts in compliance with statutory requirements. SCAO's sharing this model document is not intended (and cannot be construed) as legal advice.

Since there might be a delay in updating the model document on the web page and updating the model document in this manual, the most up-to-date version of the model document is always available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/VTC-AdmissionConditionStatement.pdf>

☐ Section 350a (parental kidnapping) or 430 (health care professional practicing under the influence) of the Michigan penal code, 1931 PA 328, or a local ordinance or another law of this state, another state, or the United States that is substantially similar to that section.

☐ None of the above.

(8) With the agreement of the prosecutor, upon successful completion of the program:

☐ The guilty plea to the charge(s) of _____ entered on the _____ day of _____, 20____, shall be withdrawn, and the charge(s) of _____ shall be entered.

☐ All charges shall be dismissed.

☐ Under MCL 600.1206 the individual pled guilty to an offense that is not a traffic offense and is eligible for discharge and dismissal under the agreement with the court and prosecutor. Upon successful completion of the VTC program, the court shall not enter a judgment of guilt.

☐ Sentencing is delayed in this matter as provided in section 1 of chapter XI of the code of criminal procedure, 1927 PA 175, MCL 771.1.

☐ Other:

—

☐ No offer has been made that is contingent upon participation in or successful completion of this program.

Honorable [name], VTC Program Judge, [court number and type] Court

Date

Appendix M

Model MOU for Transfer of Jurisdiction Under MCL 600.1088

STATE OF MICHIGAN [transferring court number and type]	PSC Memorandum of Understanding ⁵⁰ Transfer of Jurisdiction under MCL 600.1088	CASE NO. [transferring case]
The people of: <input type="checkbox"/> The State of Michigan <input type="checkbox"/>	V	Defendant's name, and DOB

Offense:	
Transferring Court:	
Receiving Court:	

Under MCL 600.1088, a case may be transferred totally from one court to another for the defendant's participation in a state-certified treatment court. A total transfer may occur before or after adjudication, but it must not be consummated until the completion and execution of a memorandum of understanding that must include, but need not be limited to, the following items.

(1) *Accounting for Funds Assessed to the Defendant*

Fines, costs, fees, restitution and other monetary obligations have been assessed as follows:⁵¹

Category of funds assessed	Balance due at time of transfer	Amount to be collected by transferring court	Amount to be collected by receiving court	Distribution of funds to remit			
				Transferring court	Receiving court	Other amount	Other agency
Total fine:							
Total costs:							
State minimum fee:							
Crime victim's rights fee:							
Restitution:							
Prosecutor reimbursement:							

⁵⁰ This model document is provided by SCAO as a resource and for informational purposes only to facilitate the operation of problem solving courts by local units of government and courts in compliance with statutory requirements. SCAO's sharing this model agreement is not intended (and cannot be construed) as legal advice.

Since there might be a delay in updating the model document on the web page and updating the model document in this manual, the most up-to-date version of the model document is always available at <http://courts.mi.gov/Administration/admin/op/problem-solving-courts/Documents/ModelPSC-TransferJurisdiction.pdf>

⁵¹ If determined by transferring court, enter as monetary amounts, or as percentage if the amount is not known. If it is to be determined by the receiving court, and the monetary amounts are not known, enter as percentages.

Law enforcement agency reimbursement:							
DNA assessment:							
Other (describe):							
Other (describe):							

Other information regarding how all funds assessed to the defendant will be accounted for:

(2) Providing Information to State Police and Forwarding Abstract to the Secretary of State

The **[transferring/receiving]** court is responsible for providing information to the department of state police, as required under section 3 of 1925 PA 289, MCL 28.243.

The **[transferring/receiving]** court is responsible for forwarding an abstract to the secretary of state for inclusion on the defendant's driving record.

(3) Where Jail Sanctions and Incarceration Sentences Will Be Served

Jail sanctions or incarceration sentences shall be served as follows:

- ☐ All jail sentences will be served at the **[transferring/receiving]** court.
- ☐ Any jail sentence of less than **[enter number]** days will be served at the **[transferring/receiving]** court, and any jail sentence of more than **[enter number]** days will be served at the **[transferring/receiving]** court.
- ☐ Any jail sentence for a program violation will be served at the **[transferring/receiving]** court.
- ☐ Any jail sentence ordered as part of program termination will be served at the **[transferring/receiving]** court.
- ☐ Other: _____

(4) The defendant has been determined eligible by and will be accepted into the state-certified treatment court upon transfer.

Signatures

Transfer is hereby ordered and effective immediately upon signature of the following persons and receipt by the receiving court, as required by MCL 600.1088.

Defendant	Date	Defense attorney	Date
Chief Judge (transferring court)	Date	Chief Judge (receiving court)	Date
Assigned Judge (transferring court)	Date	Assigned Judge (receiving court)	Date
Prosecuting Attorney (transferring court)	Date	Prosecuting Attorney (receiving court)	Date

Appendix N

*Ten Principles of a Good Testing Program*⁵²

1. Design an effective drug detection program, place the policies and procedures of that program into written form (drug court manual), and communicate the details of the drug detection program to the court staff and clients alike.
2. Develop a client contract that clearly enumerates the responsibilities and expectations associated with of the court's drug detection program.
3. Select a drug-testing specimen and testing methodology that provide results that are scientifically valid, forensically defensible, and therapeutically beneficial.
4. Ensure that the sample-collection process supports effective abstinence monitoring practices including random, unannounced selection of clients for sample collection and the use of witnessed/direct observation sample-collection procedures.
5. Confirm all positive screening results using alternative testing methods unless participant acknowledges use.
6. Determine the creatinine concentrations of all urine samples and sanction for creatinine levels that indicate tampering.
7. Eliminate the use of urine levels for the interpretation of client drug-use behavior.
8. Establish drug-testing result interpretation guidelines that have a sound scientific foundation and that meet a strong evidentiary standard.
9. In response to drug-testing results, develop therapeutic intervention strategies that promote behavioral change and support recovery.
10. Understand that drug detection represents only a single supervision strategy in an overall abstinence-monitoring program.

⁵² National Drug Court Institute. (2011). The Fundamentals of Drug Testing. In P. Cary, *The Drug Court Judicial Benchbook* (p. 137). Alexandria: National Drug Court Institute.

Appendix O

Veterans Treatment Court Minimum Standard Data

MCL 600.1210 states that each veterans treatment court shall collect and provide data on each individual applicant and participant and the entire program as required by the State Court Administrative Office. The information collected must include a minimum standard data set developed and specified by the State Court Administrative Office. In accordance with this act, the State Court Administrative Office has prepared the following minimum standard data sets. The minimum standard data sets include the minimum data that must be reported to the State Court Administrative Office on an annual basis.

Data must be collected and reported for all applicants screened for veterans treatment court, even if the applicant was not accepted into the veterans treatment court program. Therefore, the minimum standard data that follows is broken into two sets; one set for screening and one set for case management data relevant to accepted participants. This document provides descriptions and valid values for each of the variables in the minimum standard data sets. This information should be entered into the Drug Court Case Management Information System (DCCMIS), or in the SCAO excel spreadsheet template.

Set 1: Screening

If the individual is screened and accepted, all of the below variables are required. If the individual is rejected, only variables 1-11, 13-14, and 20-22 are required.

VARIABLE	DESCRIPTION	VALID VALUES
1. Court name	Name of the court	<ul style="list-style-type: none"> • Alphanumeric
2. Court type	Type of problem-solving court program	<ul style="list-style-type: none"> • Veterans
3. Referral source	Party that referred candidate to veterans treatment court	<ul style="list-style-type: none"> • Court/judicial • Defense attorney • DHS • Probation/parole • Prosecutor • Self • Other
4. Screening date	Date candidate was screened for admission	<ul style="list-style-type: none"> • mm/dd/yyyy
5. First name	Candidate's legal first name	<ul style="list-style-type: none"> • Alpha
6. Middle name	Candidate's legal middle name	<ul style="list-style-type: none"> • Alpha
7. Last name	Candidate's legal last name	<ul style="list-style-type: none"> • Alpha

VARIABLE	DESCRIPTION	VALID VALUES
8. Address	Candidate's street address at screening	<ul style="list-style-type: none"> Alpha
9. City	City associated with candidate's street address	<ul style="list-style-type: none"> Alpha
10. State	State associated with candidate's street address	<ul style="list-style-type: none"> Two-letter abbreviation
11. Zip code	Zip code associated with candidate's street address	<ul style="list-style-type: none"> Five-number postal zip code
12. Race	Race of the candidate	<ul style="list-style-type: none"> African American Alaskan Native Asian/Pacific Islander Caucasian Hispanic/Latino Multiracial Native American Other
13. Gender	Gender of the candidate	<ul style="list-style-type: none"> Male Female
14. DOB	Date the candidate was born	<ul style="list-style-type: none"> mm/dd/yyyy
15. Marital status	Marital status of the candidate at screening	<ul style="list-style-type: none"> Single Married Widowed Separated Divorced
16. Phone Number	Phone number where candidate can be reached	• (###) ###-####
16. SID	Number assigned when candidate was fingerprinted	<ul style="list-style-type: none"> Alphanumeric <ul style="list-style-type: none"> Must be accurate. All 0s not allowed.
17. SSN last 4 digits	Last four digits of candidate's Social Security number	<ul style="list-style-type: none"> Numeric <ul style="list-style-type: none"> Must be accurate. All 0s not allowed.
18. Eligible charge	Charge that made candidate eligible for veterans court	<ul style="list-style-type: none"> PACC code
19. Case/docket number	Candidate's case or docket number	<ul style="list-style-type: none"> Numeric

VARIABLE	DESCRIPTION	VALID VALUES
20. Offense category	Offense category of the veterans court eligible charge	<ul style="list-style-type: none"> • B&E/home invasion • City or county ordinance • C.S. manufacturing/distribution • C.S. use/possession • DUI alcohol first • DUI alcohol second • DUI alcohol third • Neglect and abuse civil • Neglect and abuse criminal • Nonviolent sex offense • Other alcohol offense • Other drug offense • Other criminal traffic offense • Property offense • Domestic violence • Other
21. Charge type	<p>Level of the eligible charge</p> <p>If charge type is felony, prior record variable (PRV) is required</p> <p>If charge type is felony, cell type is required</p>	<ul style="list-style-type: none"> • Civil/petition • Felony • Misdemeanor • Other • Numeric • Intermediate • Presumptive • Straddle
22. Incident offense	Eligible offense type	<ul style="list-style-type: none"> • New criminal offense • New petition • Parole violation new criminal offense • Parole violation technical • Probation violation new criminal offense • Probation violation technical
23. Offense date	Date that the eligible offense occurred	<ul style="list-style-type: none"> • mm/dd/yyyy
24. Drug court approach	Approach to sentencing that the veterans treatment court takes on the case at hand	<ul style="list-style-type: none"> • Deferred/delayed sentence • Post sentence

VARIABLE	DESCRIPTION	VALID VALUES
25. Prior convictions	Any convictions the candidate had previous to screening	<ul style="list-style-type: none"> • Yes • No <ul style="list-style-type: none"> ◦ If yes, how many felonies and misdemeanors
26. Prior substance abuse	Candidate's self-reported prior substance abuse	<ul style="list-style-type: none"> • Yes • No
27. Prior substance abuse treatment	Has the candidate received substance abuse treatment before	<ul style="list-style-type: none"> • Yes • No
28. Drug of choice	Candidate's self-reported primary drug (if applicable)	<ul style="list-style-type: none"> • Alcohol • Amphetamines • Barbiturates • Benzodiazepine • Club drugs • Cocaine • Crack cocaine • Hallucinogens • Heroin • Inhalants • Marijuana • Methamphetamines • Opiates (other) • Poly drug • Sedative/hypnotic • Other (explain)
29. IV drug user	Candidate's current use of IV drugs	<ul style="list-style-type: none"> • Currently IV drug user • Not currently IV drug user
30. History of IV drug use	Candidate's history of IV drug use	<ul style="list-style-type: none"> • No history of IV drug use • History of IV drug use
31. Primary DSM IV code	Primary DSM IV code as provided by a clinician	<ul style="list-style-type: none"> • Numeric code for substance use disorder or mental illness
32. Secondary DSM IV code	Secondary DSM IV code as provided by a clinician during screening if dually-diagnosed (if applicable)	<ul style="list-style-type: none"> • Numeric code for substance use disorder or mental illness
33. ASAM placement criteria	American society of addiction medicine level of care	<ul style="list-style-type: none"> • Level 0.5 Early Intervention • Level I Outpatient • Level II Intensive Outpatient/ Partial Hospitalization • Level III Residential/Inpatient • Level IV Medically Managed Intensive Inpatient

VARIABLE	DESCRIPTION	VALID VALUES
34. Substance Abuse Assessment Instrument	The assessment instrument used to determine clinical eligibility for participation	<ul style="list-style-type: none"> • ADAD • ASI • ASI – Lite • BSAP • GAINS • JASAE • NEEDS • other • RANT • SALCI • SASSI • SISAR
35. Risk assessment instrument	The assessment instrument used to determine criminogenic risk. Enter as “other screening/assessment”	<ul style="list-style-type: none"> • ADAD • ASI • ASI – Lite • BSAP • GAINS • JASAE • NEEDS • other • RANT • SALCI • SASSI • SISAR
36. Recommended treatment modality/service	Primary substance abuse or mental health treatment modality recommended	<ul style="list-style-type: none"> • S.A. outpatient detox • S.A. subacute detox • S.A. residential • S.A. intensive inpatient • S.A. outpatient • S.A. early intervention /education • Mental health • Other residential • Other outpatient • MATs
37. Age began using drugs	Self-reported age of first drug use	<ul style="list-style-type: none"> • Numeric
38. Age began using alcohol	Self-reported age of first alcohol use	<ul style="list-style-type: none"> • Numeric
39. Current substance abuse treatment	Is the candidate currently in a SA treatment program	<ul style="list-style-type: none"> • Yes • No
40. Current medical conditions	Candidate’s medical conditions at time of screening.	<ul style="list-style-type: none"> • None • Physical and psychological • Physical, • Psychological

VARIABLE	DESCRIPTION	VALID VALUES
41. History of mental health condition(s)	History of mental illnesses.	<ul style="list-style-type: none"> • Yes • No
42. Highest education level completed	Highest level of education completed at screening	<ul style="list-style-type: none"> • ≤11th grade • GED • High school graduate • Some trade school • Trade school • Some college • College graduate 2-year program • College graduate 4-year program • Some post graduate • Advanced degree
43. Employment history	Employment at screening	<ul style="list-style-type: none"> • Unemployed • Employed part-time (less than 35 hours) • Employed full-time (35 hours or more) • Not in labor force • Retired • Student full time • Volunteer • Disabled
44. Number of times moved in the last three years	Number of times candidate reports moving in last three years	<ul style="list-style-type: none"> • Numeric
45. Length of time at current address	Time candidate has lived at current address	<ul style="list-style-type: none"> • Months and years
46. Living situation at entry	Candidate's living situation at time of screening	<ul style="list-style-type: none"> • Dependent • Homeless • Independent
47. Has the defendant ever served in a branch of the U.S. Military	Confirmation of prior service (should be "yes" for all veterans treatment court candidates)	<ul style="list-style-type: none"> • Yes • No
48. Branch of service	Branch of service in which the candidate served	<ul style="list-style-type: none"> • Air Force • Army • Coast Guard • Marines • National Guard • Navy • Reserve

VARIABLE	DESCRIPTION	VALID VALUES
49. Enlistment or commissioning date	Date the candidate entered service	<ul style="list-style-type: none"> • mm/dd/yyyy
50. Military discharge date	Date the candidate was discharged from service	<ul style="list-style-type: none"> • mm/dd/yyyy
51. Years of service	Total years the candidate served	<ul style="list-style-type: none"> • Numeric
52. Military discharge reason	Reason the candidate was discharged from service	<ul style="list-style-type: none"> • Still serving, not yet discharged • Honorable • Entry-level separation • General (including medical) • Other than honorable • Clemency • Bad conduct • Dishonorable
53. Military rank	Rank at time of discharge	E-1, E-2, E-3, E-4, E-5, E-6, E-7, E-8, E-9, O-1, O-2, O-3, O-4, O-5, O-6, O-7, O-8, O-9, O-10, WO1, CW2, CW3, CW4, CW5
52. Criminal convictions prior to military service	Criminal convictions prior to military service	<ul style="list-style-type: none"> • Yes • No
53. Highest offense grading of conviction prior to military service	Level of conviction	<ul style="list-style-type: none"> • Felony • Misdemeanor • Summary
54. Awards and decorations	Awards or decorations earned during service	<ul style="list-style-type: none"> • Yes • No
55. Rank reduction	Rank reduced during service	<ul style="list-style-type: none"> • Yes • No
56. Military incarceration	Incarcerated during service	<ul style="list-style-type: none"> • Yes • No
54. Deployed abroad	Deployment abroad during services	<ul style="list-style-type: none"> • Yes • No
If yes – total months	Months deployed	<ul style="list-style-type: none"> • Numeric
If yes – location	Location deployed	<ul style="list-style-type: none"> • Alpha
55. Has the defendant been exposed to military combat	Exposure to combat during service	<ul style="list-style-type: none"> • Yes • No

VARIABLE	DESCRIPTION	VALID VALUES
If yes – number of deployments to combat zone	Number of deployments to combat zone	1, 2, 3, 4, 5, 6 or more
56. Conflict eras of service	Conflict at time of service	<ul style="list-style-type: none"> • World War II • Korea • Vietnam • Iraq/Kuwait ODS • Afghanistan OEF • Iraq OIF • Iraq OND
60. Witness or involvement	Witness or involvement in military combat	<ul style="list-style-type: none"> • Yes • No
57. Military-related mental illness or behavioral health issues	Military-related mental illness or behavioral health issues	<ul style="list-style-type: none"> • Depression • Bipolar • Schizophrenia • Psychosis • Other
58. PTSD	Diagnosis of post- traumatic stress disorder	<ul style="list-style-type: none"> • Yes • No
If yes	Details regarding PTSD	• Alpha
59. TBI	Diagnosis of traumatic brain injury	<ul style="list-style-type: none"> • Yes • No
If yes	Details regarding TBI	• Alpha
60. IED or HME	Exposure to improvised explosive device or homemade explosive	<ul style="list-style-type: none"> • Yes • No
If yes	Details regarding IED or HME	• Alpha
61. MST	History of military sexual trauma	<ul style="list-style-type: none"> • Yes • No
If yes	Times and locations of military sexual trauma	• Alpha
62. Date of Referral to VA/VJO	Date referred to Veterans Administration and/or Veterans Justice Outreach	<ul style="list-style-type: none"> • mm/dd/yyyy
63. Veteran eligible for benefits	Is the veteran eligible for veterans' benefits	<ul style="list-style-type: none"> • Yes • No
64. Date assessment received from VA/VJO	Date assessment received from VA/VJO	<ul style="list-style-type: none"> • mm/dd/yyyy

VARIABLE	DESCRIPTION	VALID VALUES
65. Veterans Association or group membership	Membership in veterans association or group (example: VFW)	<ul style="list-style-type: none"> • Yes • No
66. Receiving disability compensation from the VA	Whether the veteran receives disability benefits	<ul style="list-style-type: none"> • Yes • No
If yes	Percent disabled	<ul style="list-style-type: none"> • Numeric
67. Utilizing services from the Vet Center	Whether the veteran receives services from the Vet Center	<ul style="list-style-type: none"> • Yes • No
If Accepted into Veterans Treatment Court		
68. Date accepted	Date the candidate was accepted to veterans treatment court	<ul style="list-style-type: none"> • mm/dd/yyyy
69. Judge	Name of judge candidate will see	<ul style="list-style-type: none"> • Alpha
70. Case manager	Name of case manager candidate will see	<ul style="list-style-type: none"> • Alpha
71. Veteran mentor	Is a volunteer veteran mentor assigned	<ul style="list-style-type: none"> • Yes • No
If yes	Date assigned	<ul style="list-style-type: none"> • mm/dd/yyyy
72. Jail status of defendant	Was the defendant in jail when accepted into veterans court	<ul style="list-style-type: none"> • Yes • No <ul style="list-style-type: none"> o If yes, include admission date and end date

If Rejected From Veterans Treatment Court		
73. Date rejected	Date the candidate was rejected from veterans treatment court	<ul style="list-style-type: none"> • mm/dd/yyyy
74. Rejection reason	Reason for candidate's rejection from veterans court	<ul style="list-style-type: none"> • Program at capacity • Prosecuting attorney • Statutory ineligibility • Pending another case • Unable to locate • No SA diagnosis • Refusal • Mental health issue • Medical issues • History of violent offenses • Geographic/transportation issues • Judicial denial • Other • Eligible but randomized • Death • Nontarget Population

Questions about this data set can be directed to TrialCourtServices@courts.mi.gov.

Set 2: Case Management

Minimum Standard Data Set for participants accepted into veterans treatment court.

VARIABLE	DESCRIPTION	VALID VALUES
1. Third party stable contact for participant	Identify an emergency contact for the participant	• Name, address, phone number, and relationship to participant
1. Arrest date	Date participant was arrested on the eligible charge	• mm/dd/yyyy
2. Veterans treatment court entry date	Date participant entered veterans treatment court	• mm/dd/yyyy
3. Sentencing date	Date participant was sentenced on the eligible charge	• mm/dd/yyyy
4. Sentencing guidelines	Time range assigned to the eligible charge	• Days or months
5. Drug/alcohol test frequency	Dates of drug and/or alcohol tests will be used by SCAO to calculate frequency	• mm/dd/yyyy
6. Drug/alcohol test results	Indicate whether each drug/alcohol test given was positive or negative	Positive Negative
7. Monitoring frequency	Dates of participant meetings with probation officer and case manager will be used by SCAO to calculate frequency	• mm/dd/yyyy
8. Phase progression or demotion	Indicate dates participant progressed or was demoted through	• mm/dd/yyyy
8. Sanction date	Date participant received a sanction	• mm/dd/yyyy

VARIABLE	DESCRIPTION	VALID VALUES
9. Sanction type	Type of sanction the participant received	<ul style="list-style-type: none"> • 3/4 Housing • Alcohol testing increased • Community service • Court appearances increased • Curfew imposed • Detention • Drug testing increased • Jail • Job club until employed • Letter of apology • MADD impact panel • Probation reporting increased • Removal of driving privileges • Removal of social function privileges • Residential facility • Self-help sessions increased • Tether-all types • Tether or home detention • Verbal warning • Weekend program • Writing assignment/essay • Other <ul style="list-style-type: none"> ◦ If jail is given, state date in and date out
10. Sanction reason	Reason the participant received a sanction	<ul style="list-style-type: none"> • Alpha
11. Incentive date	Date participant received an incentive	<ul style="list-style-type: none"> • mm/dd/yyyy
12. Incentive type	Type of incentive the participant received	<ul style="list-style-type: none"> • Applause • Books • Court appearances decreased • Court appearances ended • Curfew extension • Drug testing decreased • Entry into gift drawing • Gift certificate • Graduate early • Individualized awards • Judicial praise • Permission to travel granted • Phase advancement • Probation reporting reduced • Probation reporting ended • Other (specify)
13. Incentive reason	Reason the participant received an incentive	<ul style="list-style-type: none"> • Alpha

VARIABLE	DESCRIPTION	VALID VALUES
14. Date of clinical assessment administered to participant.	Date that participant was assessed with a clinical assessment tool	<ul style="list-style-type: none"> mm/dd/yyyy
15. Type of clinical assessment administered to participant.	The clinical assessment tool used to assess participant.	<ul style="list-style-type: none"> ADAD ASAM ASI ASI-lite BSAP COMPAS GAINS JASAE NEEDS RANT SALCE SASSI SISAR Other (specify)
16. Timing of assessment	When the assessment was administered relative to program	<ul style="list-style-type: none"> At admission In program Post program
17. Treatment provider	Name of treatment provider	<ul style="list-style-type: none"> Alpha
18. Treatment admit date for each modality	Date the participant was admitted to a treatment modality	<ul style="list-style-type: none"> mm/dd/yyyy
19. Treatment discharge date for each modality	Date the participant was discharged from a treatment modality	<ul style="list-style-type: none"> mm/dd/yyyy
20. Number of sessions/units of treatment	Number of sessions a participant received in a treatment modality	<ul style="list-style-type: none"> Numeric
21. Number of 12-step program meetings attended	Number of 12-step meetings the participant attended during treatment	<ul style="list-style-type: none"> Numeric
22. Treatment discharge reason	Reason the participant was discharged from a treatment modality	<ul style="list-style-type: none"> Successfully completed Not completed/unsuccessful Death Other

VARIABLE	DESCRIPTION	VALID VALUES
23. Treatment modality/ service category	Type of treatment modality the participant received	<ul style="list-style-type: none"> • S.A. Outpatient detox • S.A. Subacute detox • S.A. Residential • S.A. Intensive outpatient • S.A. Outpatient • S.A. Early intervention/education • Mental health • MATs
If receiving mental health services, mental health service modality is required	Type of mental health treatment modality the participant received	<ul style="list-style-type: none"> • Assertive community treatment • Case management/support Coordination • Co-occurring treatment services • Community-based services • Crisis residential/intensive crisis stabilization • Doctor/medication review • Employment services • Inpatient hospitalization/partial day hospitalization • Residential • Therapy services
If receiving mental health services, mental health Axis I DSM-IV code is required	DSM-IV Code associated with the Axis I mental illness resulting in treatment	<ul style="list-style-type: none"> • Numeric code for mental illness.
If receiving mental health services, mental health treatment discharge reason is required	Reason the participant was discharged from a treatment modality	<ul style="list-style-type: none"> • Successfully completed • Not completed/unsuccessful • Death • Other
If receiving mental health services, mental health treatment admit and discharge dates are required	Admission and discharge date associated with the mental health treatment modality	<ul style="list-style-type: none"> • mm/dd/yyyy
If receiving medication assisted treatment services, MAT admit and discharge date are required	Admission and discharge date associated with the MAT treatment modality	<ul style="list-style-type: none"> • mm/dd/yyyy

VARIABLE	DESCRIPTION	VALID VALUES
If receiving medication assisted treatment services, answering the question: “Is this participant an opioid user and clinically eligible for MAT?” is required	Indicates the participant is an opioid user and clinically eligible to receive MAT services	<ul style="list-style-type: none"> • Yes • No
Answering the question: “Will this participant receive MAT while in the program?” is required	Indicates participants will receive MAT while in the program	<ul style="list-style-type: none"> • Yes • No
If receiving medication assisted treatment services, answering the question: “Are this person’s MAT services funded through SCAO grant funding?” is required	Indicates SCAO state funding is being used to assist in MAT services	<ul style="list-style-type: none"> • Yes • No
If receiving medication assisted treatment services, MAT Type is required	Type of medication the participant is using	<ul style="list-style-type: none"> • Naltrexone • Methadone • Suboxone
If receiving medication assisted treatment services, first dosage date and end dosage date is required	Indicates the first and last medication dosage date of the participant	<ul style="list-style-type: none"> • mm/dd/yyyy
If receiving medication assisted treatment services, MAT status at discharge is required	Identifies participants MAT status when discharged from the program	<ul style="list-style-type: none"> • Discontinued MAT Successfully • Discontinued MAT Unsuccessfully • Continued on MAT
If receiving medication assisted treatment services, answering the question: “Was the participant compliant with their MAT”, is required	Indicates medication compliance at treatment or program discharge	<ul style="list-style-type: none"> • Yes • No • Marginal • Allergy

VARIABLE	DESCRIPTION	VALID VALUES
If receiving medication assisted treatment services, number of session/units of treatment	Number of MAT units a participant received under the Mat treatment modality	<ul style="list-style-type: none"> Numeric
24. Frequency of scheduled court review hearings	Number of court reviews the participant had. SCAO uses the dates of the hearings to calculate the frequency	<ul style="list-style-type: none"> Mm/dd/yyyy
25. Ignition Interlock Pilot Program	Indicates participation in the Interlock Program	<ul style="list-style-type: none"> Yes No
If participating in the Interlock Pilot Program, answering the question, "Was participant ordered to install an Interlock device on vehicles" is required	Indicates order given to participant	<ul style="list-style-type: none"> Yes No
If participating in the Interlock Pilot Program, and the participant was ordered to install an interlock device on vehicles, then answering the question, "Did participant install interlock device on vehicle as required" is required	Indicates if interlock was installed	<ul style="list-style-type: none"> Yes No <ul style="list-style-type: none"> If yes, date is required
If participating in the Interlock Pilot Program, and the participant was ordered to install an Interlock device on vehicles, then answering the question, "Participant removed interlock device without court approval" is required	Indicates if the participant removed interlock device without permission	<ul style="list-style-type: none"> Yes No <ul style="list-style-type: none"> If yes, date and program sanction question are required

VARIABLE	DESCRIPTION	VALID VALUES
If participating in the Interlock Pilot Program, and the participant was ordered to install an interlock device on vehicles, then answering the question, "Did participant tamper with interlock device" is required	Indicates if the participant tampered with the interlock device without permission	<ul style="list-style-type: none"> • Yes • No <ul style="list-style-type: none"> o If yes, date and program sanction question are required
If participating in the Interlock Pilot Program, and the participant was ordered to install an interlock device on vehicles, then answering the question, "Did participant operate vehicle not equipped with interlock" is required	Indicates if the participant operated a vehicle without an interlock device	<ul style="list-style-type: none"> • Yes • No <ul style="list-style-type: none"> o If yes, date and program sanction question are required
26. Veterans Association or group membership	Membership in veterans association or group while participating in veterans treatment court	<ul style="list-style-type: none"> • Yes • No
27. Veterans benefits utilized in the program	Benefits utilized during participation in veterans treatment court	<ul style="list-style-type: none"> • Compensation and pension • Education • Housing services • VA health insurance • Other insurance • Vocational services
28. Receiving disability compensation from the VA	Receiving disability compensation while in the veterans treatment court	<ul style="list-style-type: none"> • Yes • No
29. Utilizing services from the Vet Center	Receiving services from the Vet Center during participation in the veterans treatment court	<ul style="list-style-type: none"> • Yes • No

VARIABLE	DESCRIPTION	VALID VALUES
30. Program discharge date	Date the participant was discharged from veterans treatment court	<ul style="list-style-type: none"> • mm/dd/yyyy
31. Program discharge reason	Reason the participant was discharged from veterans treatment court	<ul style="list-style-type: none"> • Successfully completed • Unsuccessful/new offense • Unsuccessful/noncompliant • Unsuccessful/absconded • Voluntarily withdrew • Transfer to another jurisdiction • Death • Other
32. Sentence/disposition at discharge	Participant's sentence or disposition upon discharge from program	<ul style="list-style-type: none"> • Jail = days • Probation = months • Prison = months
33. Supervision status at discharge	Participant's level of supervision upon discharge from program	<ul style="list-style-type: none"> • Completed probation • Continued probation • Not applicable
34. Education at discharge	Educational level achieved by participant at discharge	<ul style="list-style-type: none"> • \leq 11th grade • GED • High school graduate • Some trade school • Trade school graduate • Some college • College grad 2-year program • College grad 4-year program • Some post graduate • Advanced degree
35. Positive change in education	Subjective decision by case manager	<ul style="list-style-type: none"> • Yes • No
36. Employment at discharge	Employment status of participant at discharge	<ul style="list-style-type: none"> • Unemployed • Employed part-time < 35 hours • Employed full-time \geq 35 hours • Not in labor force • Retired • Student full time • Volunteer • Disabled
37. Positive change in employment	Subjective decision by case manager	<ul style="list-style-type: none"> • Yes • No

VARIABLE	DESCRIPTION	VALID VALUES
38. Custody status at discharge	Identify the type of child custody the participant had at discharge	<ul style="list-style-type: none"> • Temporarily lost custody • Regained custody • Parental rights terminated • Never lost custody • N/A
39. Case outcome at discharge	Legal case disposition	<ul style="list-style-type: none"> • Case dismissed • Charge reduced • Charge & sentence reduced • No change in charge or sentence • Sentence reduced • Not applicable • Other
40. Number of bench warrants	Number of bench warrants participant received during program	<ul style="list-style-type: none"> • Numeric
41. Number of days participant was active in the program.	Subtract the number of days participant was inactive due to a bench warrant from the total number of days participant was in the program	<ul style="list-style-type: none"> • Numeric
42. In-program new arrest-date of offense	Date of new offense that occurred during program participation	<ul style="list-style-type: none"> • mm/dd/yyyy
43. In-program new arrest-date of arrest	Date of new arrest that occurred during program participation	<ul style="list-style-type: none"> • mm/dd/yyyy

VARIABLE	DESCRIPTION	VALID VALUES
44. In-program new arrest-offense category	Offense category of new offense that occurred during program participation	<ul style="list-style-type: none"> • B&E/home invasion • City or county ordinance • C.S. manufacture/distribution • C.S. use/possession • DUI alcohol 1st • DUI alcohol 2nd • DUI alcohol 3rd • Neglect and abuse-civil • Neglect and abuse-criminal • Nonviolent sex offense • Other drug offense • Other criminal traffic offense • Property offense • Domestic violence • Other
45. In-program new arrest - charge type	Charge type of new offense that occurred during program participation	<ul style="list-style-type: none"> • Felony • Misdemeanor • Civil/petition • Other
46. In-program new conviction-date of conviction	Date of new conviction that occurred during program participation	<ul style="list-style-type: none"> • mm/dd/yyyy
47. In-program new conviction-offense category	Offense category of new conviction that occurred during program participation	<ul style="list-style-type: none"> • B&E/home invasion • City or county ordinance • C.S. manufacture/distribution • C.S. use/possession • DUI alcohol 1st • DUI alcohol 2nd • DUI alcohol 3rd • Neglect and abuse-civil • Neglect and abuse-criminal • Nonviolent sex offense • Other drug offense • Other criminal traffic offense • Property offense • Domestic violence • Other
48. In-program new conviction-charge type	Charge type of new conviction that occurred during program participation	<ul style="list-style-type: none"> • Felony • Misdemeanor • Civil/petition • Other

VARIABLE	DESCRIPTION	VALID VALUES
49. In-program new conviction-sentence type	Sentence type of new conviction that occurred during program participation	<ul style="list-style-type: none"> Jail/detention Probation Split Jail/detention and probation Prison Weekend jail Other
50. In-program new conviction-length of sentence	Length of sentence associated with new conviction that occurred during program participation	<ul style="list-style-type: none"> Jail = days Probation = months Prison = months
51. Total number of jail days spent while in program	Count any jail time associated with the eligible charge, including in-program jail sanctions and time for any new offenses	<ul style="list-style-type: none"> Numeric
52. Recidivism- new arrest post program-date of arrest	Calculated at 6 months, 1 year, 2 years, and 3 years date(s) participant was arrested for new offense(s) since discharge from the program/last review	<ul style="list-style-type: none"> mm/dd/yyyy
53. Recidivism new arrest post program-offense category nature of arrest	Calculated at 6 months, 1 year, 2 years, and 3 years	<ul style="list-style-type: none"> B&E/home invasion C.S. manufacture/distribution C.S. use/possession DUI alcohol 1st DUI alcohol 2nd DUI alcohol 3rd Neglect and abuse civil Neglect and abuse criminal Non-violent sex offense Other drug offense Other criminal traffic offense Property offense Other Nonviolent drug crime Violent drug crime Violent nondrug crime Nonviolent nondrug crime

VARIABLE	DESCRIPTION	VALID VALUES
51. Recidivism New Arrest Post program—Charge Type	Calculated at 6 months, 1 year, 2 years, and 3 years	<ul style="list-style-type: none"> • Felony • Misdemeanor • Civil/petition • Other
54. Recidivism new conviction post program- date of conviction	Calculated at 6 months, 1 year, 2 years, and 3 years	<ul style="list-style-type: none"> • mm/dd/yyyy
55. Recidivism new Conviction post program-offense category nature of conviction	Calculated at 6 months, 1 year, 2 years, and 3 years	<ul style="list-style-type: none"> • B&E/home invasion • C.S. manufacture/distribution • C.S. use/possession • DUI alcohol 1st • DUI alcohol 2nd • DUI alcohol 3rd • Neglect and abuse civil • Neglect and abuse criminal • Non-violent sex offense • Other drug offense • Other criminal traffic offense • Property offense • Other • Nonviolent drug crime • Violent drug crime • Violent nondrug crime • Nonviolent nondrug crime
54. Recidivism new conviction post program —charge type	Calculated at 6 months, 1 year, 2 years, and 3 years	<ul style="list-style-type: none"> • Felony • Misdemeanor • Civil/petition • Other
55. Recidivism post program sentence type	Calculated at 6 months, 1 year, 2 years, and 3 years	<ul style="list-style-type: none"> • Jail • Probation • Split jail/probation • Prison • Other
56. Recidivism post program length of sentence	Calculated at 6 months, 1 year, 2 years, and 3 years	<ul style="list-style-type: none"> • Jail = days • Probation = months • Prison = months
56. Current sobriety relapse status post program	Calculated at 6 months, 1 year, 2 years, and 3 years Indicates whether the participant has had a relapse incident	<ul style="list-style-type: none"> • If relapse, give date mm/dd/yyyy • Yes • No

VARIABLE	DESCRIPTION	VALID VALUES
57. Current employment status post program	Calculated at 6 months, 1 year, 2 years, and 3 years	<ul style="list-style-type: none"> • Unemployed • Employed part-time < 35 hours • Employed full-time \geq 35 hours • Not in labor force (student, home maker, retired, etc.)
58. Current employment status post program improvement	Since leaving veterans court, has employment status improved	<ul style="list-style-type: none"> • Yes • No
59. Number of days participants spent in jail or prison during this interval since program discharge	Number of days participant has been in jail or prison since program discharge/last review	<ul style="list-style-type: none"> • Numeric
60. Current employment status post program date	Date of change in employment status post program	• mm/dd/yyyy

Questions about this data set can be directed to TrialCourtServices@courts.mi.gov.